

# Religious Education Registration Student

Today's Date \_\_\_\_\_

Emergency Phone \_\_\_\_\_

## Student

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Preferred Name (nickname) \_\_\_\_\_

Gender Male Female

Grade \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Place of Birth City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

## Birth Parents

Father: First \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_

Mother: First \_\_\_\_\_ Middle \_\_\_\_\_ Maiden \_\_\_\_\_

## Student Sacrament History

Yes

No

Baptism

Eucharist/Communion

Reconciliation/Confession

Confirmation

## Head of Household / Parent / Guardian

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Work Phone \_\_\_\_\_ ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

## Spouse / Parent / Guardian

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Work Phone \_\_\_\_\_ ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email address \_\_\_\_\_

## Family Contact Information

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_