St. Nicholas Catholic Church
Parish Religious Education Program
Religious Education Registration
2010 – 2011

Please print neatly. Fill **both sides** of this form out completely and return it with fees due and a copy of your child's baptismal certificate (if newly registered) to Hope Benson.

Program times: **Grades 1 – 6** Saturday Mornings from 9:00 – 10:15 am
Grades 7 - 8 Monday Evenings from 7:00 – 8:15 pm
Elementary Sacramental Prep Saturday Mornings from 9 – 10:15 am
Middle and High School Sacramental Prep Monday Evenings from 6:00 – 6:50 pm

Program Fees: **First Child** - $70.00 (if registered by June 30 $60.00)
Second Child and up - $40.00 ea (if registered by June 30 $30.00)
Children in 2nd and 8th grades must add a $30.00 activity fee

Child's Full Name _____
First Middle Last

Child's Home Address_____
Street address

_____
City State Zip

Home Phone Number (___)_____Child's Birthdate_____
Area Code mm/dd/yyyy

City and State of Child's Birth _____ Parent's Email _____

Was the child registered last year? Y N If yes, what grade was the child in?_____
If not, grade child will enter in the fall_____
Is the family registered at St. Nicholas? Y N Env. #_____
If your family is not registered you will be asked to do so.

Sacramental Information

Sacrament	Date	Parish	City, State
Baptism			
First Communion			
Confirmation			

Parent's Information

Mother's Name_____
First Middle Initial Maiden

Father's Name_____
First Middle Initial Last

Does the child live with both parents? Y N Mom Dad Other? _____

Address _____
If different from child's address

Mom's Home Phone _____ Dad's Home Phone _____

Mom's Work Phone _____ Dad's work Phone _____

Mom's Cell Phone _____ Dad's Cell Phone _____

Is Mom Catholic? Y N Is Dad Catholic? Y N

If no, what religion? _____ _____

Emergency Information

In case parents can't be reached who should we call?

Name _____ Relationship to child _____

Home Phone Number _____Work or Cell Number _____

Address _____

Is the child allergic to anything? Yes No

Is the child currently taking any medication regularly?_____

Is the child receiving special services at
school?_____
_____
_____
_____