

**CONFIDENTIAL
REGISTRATION FORM
GRADES K TO 10**

****Subject to approval****

NAME: _____ BIRTH DATE: _____

ADDRESS: _____ HOME PH #: _____

_____ WORK PH#: _____

E-MAIL ADDRESS: _____ CELL PH#: _____

GRADE ENTERING 2016/2017 SCHOOL YEAR: _____

DATE CHURCH CITY/STATE

BAPTISM: _____

FIRST COMMUNION: _____

RECONCILIATION: _____

CONFIRMATION: _____

MASS ATTENDANCE (Please circle): WEEKLY MONTHLY HOLIDAYS ONLY NEVER

FATHER'S NAME: _____ RELIGION: _____

MOTHER'S NAME (FIRST & MAIDEN): _____

MOTHER'S RELIGION: _____

CHURCH OF MARRIAGE: _____

IMPORTANT: TO BEST SERVE YOUR CHILD, PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION. PLEASE CHECK IF IT APPLIES TO YOUR CHILD.

LEARNING DISABILITIES _____	SPEECH _____
READING _____	HEARING IMPAIRED _____
HYPERACTIVE _____	ATTENTION DEFICIT _____
ALLERGIES _____	ASTHMA _____
OTHER _____	

PLEASE EXPLAIN: _____

RIGHTS OF NON-CUSTODIAL PARENTS: This parish catechetical program abides by the provisions of the Buckley Amendment with respect to the rights of non-custodial parents. In the absence of a court order to the contrary, we will provide the non-custodial parent with unofficial copies of records. If there is a court order specifying that there is to be no information given, it is the responsibility of the custodial parent to provide the catechetical leader with an official copy of the court order.
******NOTE:** If there is presently a restraining order against your spouse, we will need a copy of that part only that shows the order*****

HAVE YOU COMPLETED A PARISH REGISTRATION FORM? YES _____ ID# _____ NO _____
DO YOU RECEIVE ENVELOPES? YES _____ NO _____
COPY OFF BAPTISM CERTIFICATE FOR 1ST GRADER: _____

FOR OFFICE USE ONLY: FEE PAID: YES _____ AMT. _____ CASH OR CHECK _____
NO _____