

**SAINT JAMES CATHOLIC CHURCH
RELIGIOUS EDUCATION
REGISTRATION FORM
2010 – 2011**

Child's Last Name _____ First Name _____ Middle _____

Home Address _____

City _____ State _____ Zip _____

Home phone # _____ Cell phone # _____

Email address _____ Do you read it often? _____

Father's work # _____ Mother's work # _____

Emergency Contact: _____ Phone # _____

Place of Birth (City, State, Country) _____

Date of Birth _____ Sex _____ Age _____

School for 2009-2010 _____ Grade _____

Father's Full Name _____

Religion _____ Living or deceased (please circle)

Mother's First and Maiden Name _____

Religion _____ Living or deceased (please circle)

Step-Parent or Guardian _____

Please circle Family Information:

Married Separated Single Parent Divorced Remarried

If the mother is re-married, what is her last name? _____

When sending information home, to whom should it be addressed?

(Please attach a copy of the baptismal certificate to this form.)

Name of church where the child was baptized _____

City _____ State _____ Date of baptism _____

Are you a registered member of Saint James Catholic Church? _____

OFFICE USE ONLY

Registration paid:

Date: _____ Amount: _____ Check # _____ Cash _____

Does your child have any special needs that the CCD staff should be aware of?
(Example: medical, educational, personal, food allergies)

Parent's Signature _____

Has your child attended full day catholic school? _____

In what parish? _____ Years of attendance: From _____ to _____

Has your child attended religious education in another parish? _____

In what parish? _____ Years of attendance: From _____ to _____

If you have a letter of recommendation, please attach it to this form.

Sacramental Information:

For children who have already received the Sacraments of Reconciliation and Eucharist.

Name of Parish in which the Sacrament of Reconciliation was first celebrated?

Parish _____ City _____ State _____

Name of Parish in which the Sacrament of the Eucharist was first celebrated?

Parish _____ City _____ State _____

Date of the First Eucharist _____

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Tuition for Sunday Religious Education

1 child \$65

2 children \$100

3 or more children \$135

No child will be excluded from our program due to financial need.

I am willing to volunteer in lieu of paying the registration fee as:

___ Catechist (full time) ___ Catechist (part time) ___ Substitute catechist

___ Classroom aide ___ Substitute aide ___ Christmas program