

## - Religious Education Registration

715 E Orange St , Tarpon Springs, FL 34689

**Term:** 2025-2026

### FAMILY INFORMATION

**Family Last Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Father: \_\_\_\_\_ Father's Email: \_\_\_\_\_

Mother: \_\_\_\_\_ Mother's Email: \_\_\_\_\_

Mother's Maiden: \_\_\_\_\_ **Emergency Contact:** \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, St, Postal: \_\_\_\_\_

Father's Cell / Work: \_\_\_\_\_ Father Religion: \_\_\_\_\_

Mother's Cell / Work: \_\_\_\_\_ Mother Religion: \_\_\_\_\_

### STUDENT INFORMATION

**Student Name:** \_\_\_\_\_ **Catholic?** Yes / No

Gender: ☐ Male ☐ Female

Birth Date: \_\_\_\_\_

Grade: \_\_\_\_\_

Session: \_\_\_\_\_

Class: \_\_\_\_\_

**What sacrament is needed:**

☐ Baptism: \_\_\_\_\_

☐ Eucharist: \_\_\_\_\_

☐ Reconciliation: \_\_\_\_\_

☐ Confirmation: \_\_\_\_\_

**Special Needs** (Medical, Learning Disabilities, Physical Disabilities etc):

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NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

**Tuition DUE:** \$ \_\_\_\_\_ **Tuition PAID:** \$ \_\_\_\_\_ **Signature:** \_\_\_\_\_

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