

Date: _____

2025-2026
Religious Education Registration Form
(262) 652-1844 | 2223 51st Street, Kenosha, WI 53140
www.stanthonykenosha.org

Family Name and Contact				
Mother's Name (or legal guardian)	First	Middle	Last	
	Mother's Maide	en Name:		
Father's Name (or legal guardian)				
	First	Middle 	Last	
Mother (legal guardian) Phone:		Father (leg	Father (legal guardian) Phone:	
Primary Email:		Secondary	Secondary Email:	
Parish Member of:				
		Home Address		
Address:		City:	City:	
State:		Zip Code	Zip Code:	
		Emergency Conta	ct	
Name:				
Phone Number:				
Address:				
		Child Informatio	n	
Child's Name:				
	First	Middle	Last	
Sex:	Birthdate:		Grade:	
Allergies:				
Please let us know a	nything about your ch	aild that would be helpful to	o the Catechist:	
Parent / Legal G	Guardian Signatu	re:		