St. Mary Church & St. Rose Church

Religious Education 2026-2027 Registration Form

STUDENT INFORMATION

Last Name		First Name		Date of Birth	

School Name	Grade	Age	Gender M / F	Medical Information & Concerns (Food Allergies, etc.)

Please attach a copy of your child's birth certificate (new students) and sacramental certificate(s) *if not* already on file.

Has your child received any of the following Sacraments? If yes, please provide the location and year received.

BAPTISM YES or NO	FIRST RECONCILATION YES or NO	FIRST COMMUNION YES or NO	CONFIRMATION YES or NO
Parish	Parish	Parish	Parish
City/St.	City/St.	City/St.	City/St.
Year Received	Year Received	Year Received	Year Received

PARENT/GUARDIAN INFORMATION

	Last Name	First Name	
Father's Name			
Mother's Name			***Maiden Name
Guardian's Name			

Parent's Marriage	If you are not married or not married in the Catholic church, would you like to be married in the church?	Yes	No
	Would you like for a priest to contact you about the process to get married in the Catholic Church?	Yes	No

MAILING INFORMATION

Mailing Address	
Physical Address	

Home Phone #	Cell #	Cell #
Email Address		

EMERGENCY CONTACT INFORMATION

EMERGENCY CONTACT Please include an emergency contact (other than a parent), which will be used as an alternate number if you cannot be reached. This contact will only be used if we are not able to contact you directly with important information for your child regarding the Religious Education program.

Emergency Contact -Name	Relationship	Phone #
Emergency Contact -Name	**Relationship**	**Phone #**

SIBLINGS IN RELIGIOUS EDUCATION

Name	Grade	Session 1 or Session 2
Name	Grade	Session 1 or Session 2
Name	Grade	Session 1 or Session 2

Office Use Only

Kindergarten through 12th Grade Fees $30.00 Per Student (3 or more students $90.00 total)

Date		Receipt#	

Check #		Cash $		Total Paid $	

Registered @ St. Mary Parish		Registered @ St. Rose Parish		Paid by Breeze Online	