

OUR LADY OF GUADALUPE PARISH  
Religious Education Program  
Registration form: 2017-2018 SCHOOL YEAR

THE REGISTRATION FEE FOR RELIGIOUS EDUCATION CLASSES IS \$150.00 for 1<sup>st</sup> child. \$100.00 for each addition child. THIS IS A **NON-REFUNDABLE FEE.** ALONG WITH THE FEE A **COPY** OF THE CHILD'S BAPTISMAL IS NEEDED. **\*\*NO CHILD WILL BE PERMITTED TO ENTER THE PROGRAM WITHOUT A COPY OF THEIR BAPTISMAL CERTIFICATE.**

CHILD'S NAME \_\_\_\_\_

Family Last Name \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ Gender \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME TELEPHONE \_\_\_\_\_ Cell# \_\_\_\_\_

PARENT'S WORK # \_\_\_\_\_

Are you registered in Our Lady of Guadalupe Church? Yes or no

If yes: what is your Parish # \_\_\_\_\_

If not: would you like us to register you? Yes or No

Public School \_\_\_\_\_ Grade in September. \_\_\_\_\_

Does your child need to be baptized yes or no

Church of Baptism: \_\_\_\_\_ Date: \_\_\_\_\_

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

Church of First Holy Communion \_\_\_\_\_ Date \_\_\_\_\_

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

Where did your child attend Religious Classes last year? \_\_\_\_\_

If your child is a new student a report card or transfer form from last Religious Education Program is needed.

Please Initial:

\_\_\_\_\_ I consent to have my child present for the **mandatory** child lures session that will be taken place during class.

DOES STUDENT HAVE ANY ALLERGIES? \_\_\_\_\_ ON MEDICATION? \_\_\_\_\_

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DOES YOUR CHILD CURRENTLY ATTEND A SPECIAL EDUCATION OR RESOURCE PROGRAM IN THEIR PUBLIC SCHOOL? \_\_\_\_\_

IF CHILD HAS SPECIAL NEEDS, WHAT IS THE NATURE OF THEIR DISABILITY?

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Are there any other children attending our Program? \_\_\_\_\_

Names: \_\_\_\_\_

**IN CASE OF EMERGENCY: PLEASE LIST TWO NAMES.**

PERSON TO CONTACT \_\_\_\_\_ PHONE # \_\_\_\_\_

RELATIONSHIP TO STUDENT \_\_\_\_\_

PERSON TO CONTACT \_\_\_\_\_ PHONE # \_\_\_\_\_

RELATIONSHIP TO STUDENT \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ **Office use only** \_\_\_\_\_

Attached:

Baptism Certificate \_\_\_\_\_

First Holy Communion Certificate \_\_\_\_\_

Registered by: \_\_\_\_\_ Date: \_\_\_\_\_