

St. Anthony's Catholic Church
Religious Education Registration 2010-2011

Date: _____ Form Completed by: _____

Tuition: \$30.00 per child

: \$60.00 for more than three children

Checks are made payable to *St. Anthony's Catholic Church* **Amount Due:** _____

Send Completed Form & Tuition to the parish address, *Attn: RE Registration*

Family Information

Children's Last Name: _____

Mother's Name: _____

Maiden Name: _____ **Religion** _____

Mother's Mailing Address: _____ **Home:** _____

City, State, Zip: _____ **Work:** _____

Mother's Email Address: _____ **Cell:** _____

Father's Name: _____ **Religion:** _____

Father's Mailing Address: _____ **Home:** _____

City, State, Zip: _____ **Work:** _____

Father's Email Address: _____ **Cell:** _____

Student Registration

	Child #1	Child #2	Child #3
First Name			
Last Name (if different)			
Gender			
Date of Birth			
Grade in School (10-11)			
<i>Medical Info/Food Allergies:</i>			

Sacraments

Catholic Baptism: yes no yes no yes no

If no, what denomination? _____

Must have original Baptism Certificate,

Including address of the Church: _____

First Reconciliation: yes no yes no yes no

First Eucharist: yes no yes no yes no

Confirmation: yes no yes no yes no