

**HOLY NAME PARISH RELIGIOUS EDUCATION
REGISTRATION FORM 2009-2010**

Grade level/Sacrament year _____

Child's full name: _____

Place and Date of Birth: _____

Address, City & Zip _____

Name of school attending: _____ Grade: _____

Father's Full Name: _____ tel# _____

Address: (if different than child's) _____

Mother's Full Name: _____ tel# _____

Address: (if different than child's) _____

Email Address: _____

Are you currently a registered member of Holy Name? _____

Parish envelope/ family ID # _____

EMERGENCY CONTACT PERSON: _____

Phone/Cell #: _____

Relationship to child: _____

Medical conditions we should be aware of: (ie seizures, ADHD, ADD, diabetes, special needs, etc.) _____

Allergies to food or bees, etc. _____

Date of Baptism & Name of Church @ which baptized: _____

(if not at Holy Name Parish, please include copy of baptismal record, if already done so, please indicate as such so we may update our records)

Number of years attended Religious Ed. classes (CCD) & what Grade completed: _____

In what way would you like to contribute to your child(ren)'s Religious education?

Suggestions: A Catechist, an Aide, Substitute Catechist, Christmas Pageant, Three Kings Pageant (Jan.), Palm Sunday Pageant, help with hospitality, help with making costumes, baking for events, storytelling to the children, help with Children's Liturgies, office help, etc.

Registration fees for registered Parish members are as follows:

\$40.00 Registration Fee per child or \$70.00 per family. Enclosed: _____ check

_____ cash. Made out to Holy Name Religious Ed., Mail to:

Religious Education, Holy Name Parish, 323 Dickinson St. Spfld., MA 01108