

Saint Peter Parish Office of Religious Education

2014-2015 Registration Form

Dear Parents,

Please fill-out this form for your children who will be attending Religious Education this Fall. In order to fund this program, there is a \$25.00 fee per child or \$60.00 fee for a family of 3 or more children. (Note: there is no fee for 9th grade students, but please still complete form). These fees go towards the cost of the textbooks, space rental, and supplies. Checks can be made to "Saint Peter Parish." Know that no child will be turned away in the case of financial difficulty. Thank you!

Family Name: \_\_\_\_\_ Number of children in Religious Education \_\_\_\_\_

Primary Contact Information:

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School District \_\_\_\_\_ Home phone: \_\_\_\_\_

E-mail address (So we can send information and forms via e-mail)

Parent Information:

Mother's name \_\_\_\_\_

Father's name \_\_\_\_\_

Maiden Name \_\_\_\_\_

Religion/ Denomination \_\_\_\_\_

Religion/ Denomination \_\_\_\_\_

Cell number \_\_\_\_\_

Cell number \_\_\_\_\_

Emergency Name and contact number if parents can not be reached: \_\_\_\_\_

Custody Agreements: Please note if the custody of any child in this family is subject to court ordered custody agreements: \_\_\_\_\_

In the case of shared custody, who is primarily responsible for religious education (to whom should letters and information be sent?) \_\_\_\_\_ Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardian

Is there any other information we should know regarding custody?

Volunteer Information (must have Protecting God's Children Clearances):

If you are willing to consider volunteering some of your time to the religious education program, please note your area of interest (i.e. substitute teaching)

Name \_\_\_\_\_ Contact number/ email \_\_\_\_\_

Area of volunteer interest: \_\_\_\_\_

\_\_\_\_\_

**Student #1** (Please begin with oldest child):

\_\_\_\_ Male \_\_\_\_ Female

Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Birthdate \_\_/\_\_/\_\_\_\_ School \_\_\_\_\_ Grade in School (Fall 2014) \_\_\_\_\_

Sacrament Information:

Baptism: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Reconciliation: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Eucharist: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Health, Medical, and Special Needs (i.e. Chronic health concerns, allergies, medications your child needs while in class, or special educational and/ or behavioral traits) \_\_\_\_\_

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Note: Parents are welcome to contact the Religious Education office throughout the year if they would like to discuss or supplement medical information provided. If action needs to be taken for a medical concern, such as an epi-pen, please let us know.

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**Student #2**

\_\_\_\_ Male \_\_\_\_ Female

Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Birthdate \_\_/\_\_/\_\_\_\_ School \_\_\_\_\_ Grade in School (Fall 2014) \_\_\_\_\_

Sacrament Information:

Baptism: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Reconciliation: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Eucharist: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Health, Medical, and Special Needs (i.e. Chronic health concerns, allergies, medications your child needs while in class, or special educational and/ or behavioral traits) \_\_\_\_\_

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**Student #3**

\_\_\_\_ Male \_\_\_\_ Female

Full Name \_\_\_\_\_ Nickname \_\_\_\_\_

Birthdate \_\_/\_\_/\_\_\_\_ School \_\_\_\_\_ Grade in School (Fall 2014) \_\_\_\_\_

Sacrament Information:

Baptism: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Reconciliation: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Eucharist: Church: \_\_\_\_\_ City/ State: \_\_\_\_\_

Health, Medical, and Special Needs (i.e. Chronic health concerns, allergies, medications your child needs while in class, or special educational and/ or behavioral traits) \_\_\_\_\_

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**Information on this form will remain confidential and will only be shared with Catechists for the safety and wellbeing of your child/ children. If you have any questions or concerns, please contact Katie Boosel at 724-794-2880 or [education@rockcatholic.org](mailto:education@rockcatholic.org).**