

Received by office on: _____ Initial: _____

St. Bernadette Catholic Parish

2022 – 2023 Religious Education Registration Form

Only parent/legal guardian may register children for class

Please print clearly

Family Last Name: _____ Primary Phone: _____

Mailing Address: _____

Street Number & Street Name City State Zip

Father's Name: _____ Father's Cell Phone: _____

Mother's Name: _____ Mother's Maiden Name: _____

Mother's Cell Phone: _____ Family Email: _____

Child(ren) live with: _____

Is your family registered with St. Bernadette? Yes No unknown

Emergency Contact Information:

Name: _____ Phone Number: _____ Relationship: _____

Child(ren) Information:

Child #1 Name: _____ Date of Birth: _____

Gender: Male Female

Child's school grade: _____ School presently attending: _____

Child's Sacraments Received:

Has child received BAPTISM? Yes No Date: _____

Name and complete address of church: _____

Is a copy of the Baptism Certificate on file with St. Bernadette? Yes No unknown

Has child received RECONCILIATION (Confession)? Yes: No Date: _____

Has child received EUCHARIST (First Communion)? Yes: No Date: _____

Has child received CONFIRMATION: Yes No Date: _____

When and where did your child last attend Religious Education Class? _____

Does your child have any allergies, special health concerns, or require any exceptional student education services? _____

Child #2 Name: _____ Date of Birth: _____

Gender: Male Female

Child's school grade: _____ School presently attending: _____

Child's Sacraments Received:

Has child received BAPTISM? Yes No Date: _____

Name and complete address of church: _____

Is a copy of the Baptism Certificate on file with St. Bernadette? Yes No unknown

Has child received RECONCILIATION (Confession)? Yes: No Date: _____

Has child received EUCHARIST (First Communion)? Yes: No Date: _____

Has child received CONFIRMATION: Yes No Date: _____

When and where did your child last attend Religious Education Class? _____

Does your child have any allergies, special health concerns, or require any exceptional student education services? _____

Child #3 Name: _____ Date of Birth: _____

Gender: Male Female

Child's school grade: _____ School presently attending: _____

Child's Sacraments Received:

Has child received BAPTISM? Yes No Date: _____

If Yes: Church _____

Church Complete Address: _____

Is a copy of the Baptism Certificate on file with St. Bernadette? Yes No unknown

Has child received RECONCILIATION (Confession)? Yes No Date: _____

Has child received EUCHARIST (First Communion)? Yes No Date: _____

Has child received CONFIRMATION: Yes No Date: _____

When and where did your child last attend Religious Education Class? _____

Does your child have any allergies, special health concerns, or require any exceptional student education services? _____

Child #4 Name: _____ Date of Birth: _____

Gender: Male Female

Child's school grade: _____ School presently attending: _____

Child's Sacraments Received:

Has child received BAPTISM? Yes No Date: _____

Name and complete address of church: _____

Is a copy of the Baptism Certificate on file with St. Bernadette? Yes No unknown

Has child received RECONCILIATION (Confession)? Yes: No Date: _____

Has child received EUCHARIST (First Communion)? Yes: No Date: _____

Has child received CONFIRMATION: Yes No Date: _____

When and where did your child last attend Religious Education Class? _____

Does your child have any allergies, special health concerns, or require any exceptional student education services? _____

Parent/Guardian: St. Bernadette Catholic Parish has a wonderful group of volunteer parishioners committed to offering quality Confraternity of Christian Doctrine (CCD) classes through the Religious Education program to the youth of the parish in the hopes of growing their faith in Our Lord, Jesus Christ.

Classes will be held on Sundays from 8:45 am - 9:45 am

By signing below, you agree to the following:

- **You are the parent or legal guardian of the student(s).**
- **You understand that attendance of your child(ren) to their registered class on Sunday's at the designated time is required. This is especially important if your child is registering for a sacramental class.**
- **In order to receive a sacrament, students must attend 70% of classes scheduled. (Not miss more than 8 classes)**
- **Students/Family must make every effort to attend Mass on Saturday (Vigil Mass) or on Sunday and on Holy days of Obligation. Online mass is only for the sick or homebound, there is no dispensation in place at this time (see attached letter from Bishop Wack).**
- **You agree to pay the appropriate registration fee associated with the number of children you are registering.**

Fees must be made upon turning in this form. Registration fees are as follows:

1 Child - \$40 2 Children - \$60 3 or More Children - \$80

Print Name:

Signature: _____ Date: _____

Please list any information you think would be helpful for us to learn more about your child(ren). This could include, explanation of allergies, educational needs, or custody related issues, but it could also include hobbies, interests, extracurricular activities your child(ren) might have.

Church Personnel Use Only

Received by: _____ Date: _____

Recorded by: _____ Date: _____ Paid

Date: _____ Cash: _____ Check: _____ Check #: _____