

**ALL SAINTS RELIGION PROGRAM REGISTRATION**

Please print and complete all information:

Child's name: \_\_\_\_\_ Grade \_\_\_\_\_

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Child's name: \_\_\_\_\_ Grade \_\_\_\_\_

Are there any circumstances we need to be aware of: divorce, learning disability, allergies, other?

\_\_\_\_\_

Father's name: \_\_\_\_\_ cell# \_\_\_\_\_

Catholic? Yes No

Mother's name: \_\_\_\_\_ cell# \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Catholic? Yes No

Married? Yes No Where: \_\_\_\_\_

Home address: \_\_\_\_\_

\_\_\_\_\_

Home phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency contact other than parents: Name: \_\_\_\_\_

Relationship to student(s) \_\_\_\_\_

Cell or home phone: \_\_\_\_\_

IF CLASS MUST BE CANCELLED due to weather or other reason PLEASE WRITE BEST CONTACT :

TEXT: \_\_\_\_\_ OR CALL: \_\_\_\_\_

FEE FOR CLASSES:

\$20 PER CHILD Please attach payment to registration.

Registration Paid: YES NO check # \_\_\_\_\_ Cash \_\_\_\_\_

Financial Aid is available to active parishioners. Please contact Parish Office to see if you qualify. 485-4476