

*St. Columba Religious Education
Registration Form 2008 – 2009*

Child's Name: _____
 Father's Name: _____ Middle Initial: _____ Religion: _____
 Mother's Name: _____ Maiden Name: _____ Religion: _____
 Street Address: _____ Town: _____ Zip Code: _____
 Home Phone: _____ Work Phone (List Parent/s & Times): _____
 Name of Person to contact in case of emergency: _____ Telephone: _____

Please list the names of your children from elementary through high school. Please include the full name of the school your child/ren attend, whether Catholic, private or public. Please check (✓) if home study. Parent registering children for the first time: For each child not baptized at St. Columba, please attach a copy of the Baptismal Certificate

Names of Children (oldest to youngest)	Date of Birth	Entering Grade	Last Grade in Rel. Ed.	Sacraments received Bapt. Euch. Pen.	Home Study (Yes = ✓)	Name of School	Church, Location & Date of Baptism

Registration fees are \$40.00 per student Please enclose payment with your registration
 Are there any special educational needs we need to be made aware of? Confidentiality is maintained for all personal information.

Does any of your children have any medical conditions or allergies we need to be made aware of? _____
 I would like to help: _____ Teach Grade: _____ Substitute Teaching Grade: _____
 Weekly Snack (Church Hall) _____
 Classroom Aid (Committed Jr. High or High School Students welcome) Name/s: _____
 Help with grade/class projects: Name/s: _____ Best time to be reached: _____

Office Use Only: Cash: _____ Check # _____ Date: _____ / _____ / _____ Amount Received \$ _____