

St. Anthony's Catholic Church
Religious Education Registration Form

Family Name(s): _____

Father's Name: _____ Mother's Name: _____

Are parents married? **Yes or No**

If married, was it within the Catholic Church: **Yes or No** or Civil Ceremony? **Yes or No**

Are you interested in RCIA: _____

Complete Address: _____

City: _____ State: _____ Zip Code: _____

Telephone #: _____ Sunday/Emergency #: _____

E-Mail: _____

Child's Full Name	Date of Birth	Grade in School	Rec'd Baptism	Rec'd Reconciliation	Rec's First Communion

A copy of sacramental certificates are required at registration.

Does your child(ren) require any special needs in the classroom? Yes or No

Do you need to make baptismal arrangements for any of the children? Yes or No

Would you be interested in being a Parent Helper within this program? Yes or No

Please note: our Parish has a website where your child may be pictured for various celebrations. This registration form serves as permission to publish any such photos within the activities of the CCD program.

Child(ren)'s Grade Tracker

Grade						
PK						
K						
1st						
2nd						
1st Comm						
3rd						
4th						
5th						
6th						
7th						
8th						
9th						
10th						
Conf						