Saint Patrick Catholic Church

Parish School of Religion - Faith Formation 2022-2023

Please return Registration Form and Fee to Church Office

REGISTRATION FORM STUDENT INFORMATION	Regist	ration Fee \$25.00	
Namo			
Name:First	Middle	Last	
Date of Birth:	Age:	School Grade entering:	
School Attending:	City/State where	e child was born:	
Child has received the following Sacram		Communion	
Name of Church		Name of Church	
Confirmation		Name of Charen	
Name of Church	n other than at St. Patrick, volunion or Confirmation.	ve will need a copy of the Baptismal Certificate prior to	0
PARENT / GUARDIAN INFORMATION			
FATHER'S NAME		PHONE	
First	Last		
MOTHER'S NAME		PHONE	
First	Last	MAIDEN PHONE	
ADDRESS			
		ZIP	
PLEASE share your Email add	r <mark>ess:</mark>		
In event of an unscheduled class ca	ncelation, we will read	h you most quickly by email through NOTIFY	MF via
the state of the s		aintpatrickcc.com on the HOME page in the I	
		anyone other than church staff for importan	
notification purposes.		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Allergies or Health Concerns and Emergen			
	•	gies since we have treats on occasion)	
Emergency Contact: Where of	can we reach <mark>an ADUL</mark>	<u>T</u> during class time if an emergency occurs?	
Contact Person Name:		Relationship:	

If someone other than a parent has permission to pick your child up after class, please list below:

Relationship:

Children will **NOT** be released to anyone other than these listed.

Name(s):