

*Blessed Sacrament Religious Education Program*  
**Registration: Grade 2-10**  
**and new to the parish**  
**2011-2012**

Grade \_\_\_\_\_

Child's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_  
Last First Middle  
Place(city)of Birth \_\_\_\_\_

Address \_\_\_\_\_ Home Phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

\*Child's Place of Baptism \_\_\_\_\_ Date \_\_\_\_\_

Public School Attending \_\_\_\_\_ Grade \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Current Name \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Pnone# \_\_\_\_\_

**Please note here any information that the Religious Education Teacher should know to help your child have the most positive experience:  
e.g. allergies, special needs, guardianship, custody arrangements, etc.  
All information is confidential**

**\* Students new to Blessed Sacrament must submit a Baptismal Record in order to be placed into a classroom**

Last Religious Ed. Class Attended: Grade \_\_\_\_\_ Year \_\_\_\_\_ What Parish? \_\_\_\_\_

First Reconciliation: \_\_\_\_\_ Place \_\_\_\_\_ Date \_\_\_\_\_  
Yes or NoFirst Eucharist: \_\_\_\_\_ Place \_\_\_\_\_ Date \_\_\_\_\_  
Yes or No

---

Amount enclosed \_\_\_\_\_ No. of Children Enrolled in this Program \_\_\_\_\_  
Balance due \_\_\_\_\_ Names/Grades \_\_\_\_\_

**Please check here if you can help in some way in the religious education program** \_\_\_\_\_  
**Teacher** \_\_\_\_\_ **Substitute** \_\_\_\_\_ **Assistant** \_\_\_\_\_ **General** \_\_\_\_\_  
**Hall Monitor(adults only)** \_\_\_\_\_

Signed \_\_\_\_\_ Date \_\_\_\_\_

