

St. Adalbert and Ss. Peter & Paul's Parish, Elizabeth NJ

RELIGIOUS EDUCATION PROGRAM REGISTRATION FORM

YEAR: 2017-2018

Please circle one: *New Registration* *Re-Registration (indicate last grade attended)* _____

Child's Name _____

Address _____

Town _____ Zip Code _____

Home Phone Number _____ Emergency Phone Number _____

Name of School _____ Grade _____

Any special health issues? Allergies? _____

Parish Envelope Number: _____ *Family registration in the parish is required.*

Father's Name _____

Mother's Maiden Name _____

(Name of Legal Guardian if different from parents listed above) _____

Child's Birth Date _____ City & State _____

Sacraments *Please provide the name of the church and city & state.*

Baptism Date _____ Place _____

First Penance Date _____ Place _____

First Communion Date _____ Place _____

Please Note:

- ** *Baptismal Certificate required of new registrants if not baptized at St. Adalbert's or Ss. Peter & Paul's.*
- ** *Two years preparation is required for Penance, First Eucharist, and Confirmation.*
- ** *Children enrolled in our Religious Education Program are expected to attend Mass every Sunday.*
- ** *All communications will be sent to the address listed above.*
- ** *Parental signature indicates willingness to follow guidelines established by the Religious Education Coordinator pertaining to the Religious Education Program and Sacramental Preparation.*

Signature of Parent or Guardian _____ **Date** _____

Registration Fee: \$80.00

Family: \$120.00

Fee received by: _____ Date _____

children _____ Amount _____

Cash _____ Check # _____