

## REGIONAL SCHOOL REGISTRATION FOR SACRAMENTS

***DEADLINE: This form must be completed and received by the School of Religion Office by June 15, 2017.***

Child's Name:		Sex: M F	Date of Birth	AGE (as of 9/17)	Grade (as of 9/17)
Address		Town		Zip Code	
Family Email Address		Home Phone #:		<b>ALLERGIES:</b>	
Father's Name		Father's Email	Cell Phone #	Father's Religion	
Father's Address <i>(if different from above)</i>		Town, Zip		Marital Status	
Mother's First Name	Maiden Name	Mother's Email	Cell Phone #	Marital Status	
Mother's Address <i>(if different from above)</i>		Town, Zip		Mother's Religion	
Requesting (Circle One)	First Communion	Date of First Communion			
	Confirmation				
Religion Child was Baptized into		Church of First Communion			
Name and Address of Church of Baptism		Reconciliation Yes or No			
<b>FOR OFFICE USE ONLY</b>					
Letter from Regional School (Must include Level Completed and List of Sacraments Received)				YES	NO
Baptismal Certificate Seen & Copied				YES	NO
Census checked				YES	NO

***PARISH RELIGIOUS EDUCATION PROGRAM:***

St. Joseph's Parish Education Program is offered to the children of parishioners to help them fulfill their obligation to teach their children the truths of our Catholic faith. Parishioners include all those who live within the parish boundaries and those who demonstrate their membership by their participation in the ministries of the parish and by their financial support.