

REGIONAL SCHOOL REGISTRATION FOR SACRAMENTS

DEADLINE: This form must be completed and received by the School of Religion Office by June 21, 2019.

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|--|-----------------|---------------------------|---------------|-------------------|--------------------|
| Child's Name: | | Sex: M F | Date of Birth | AGE (as of 9/19) | Grade (as of 9/19) |
| Address | | Town | | Zip Code | |
| Family Email Address | | Home Phone #: | | ALLERGIES: | |
| 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 | | | |
| FOR OFFICE USE ONLY | | | | | |
| 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.