

**2023-2024**

# Saint Lawrence Religious Education Registration Form

Please clearly print all information. All families of our Religious Education program must be registered parishioners.

**CHILD'S INFORMATION:**

Birth Date: \_\_\_/\_\_\_/\_\_\_ Male/Female Place: \_\_\_  
*First Name Last Name Circle One City/State Country*

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
*Street Town*

Child lives with (please circle one): Both Parents Father Mother Grandparents Guardian

School: \_\_\_\_\_ Grade in September 2023: \_\_\_\_\_ Religious Education Grade: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone#: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

**Sacraments Received:**

Baptism Church: \_\_\_\_\_ Date: \_\_\_\_\_  
*Name City/State Country*

**NOTE: Need a copy of Baptism Certificate if the child was not baptized in Saint Lawrence.**

Penance Church: \_\_\_\_\_ Date: \_\_\_\_\_  
*Name City/State Country*

Eucharist Church: \_\_\_\_\_ Date: \_\_\_\_\_  
*Name City/State Country*

**Special Needs:** Please circle if any accommodations are needed in the following areas -

- \*Attention Deficit Hyperactivity Disorder \*Deaf or hard of hearing \*Use mobility aid (wheelchair, leg braces, etc.)
- \*Autism Spectrum Disorder (Autism, Asperger's Syndrome, etc.) \*Developmental disability \*Low vision/legally blind
- \*Behavioral / emotional disorder \*Other (please specify): \_\_\_\_\_
- \*Allergies: \_\_\_\_\_

If the child has begun religious education at another parish/Catholic school, please indicate:

Parish Religious Education OR Catholic School \_\_\_\_\_  
*Circle one Name City*

**PARENT/GUARDIAN'S INFORMATION:**

MOTHER : \_\_\_\_\_ ( \_\_\_\_\_ ) Religion: \_\_\_\_\_  
*First Name Last Name Maiden Name*

Home Address: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Carrier for Text: \_\_\_\_\_

**Texting Instructions:** For those of you who do not use email or prefer to be texted please provide your phone carrier (i.e. Verizon, Sprint...) We may need to inform you of a school closing or any other immediate message.

FATHER: \_\_\_\_\_ Religion: \_\_\_\_\_  
*First Name Last Name*

Home Address: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Carrier for Text: \_\_\_\_\_

**(See Texting instructions on bottom of page 1)**

GUARDIAN: \_\_\_\_\_ Religion: \_\_\_\_\_  
*First Name Last Name*

Home Address: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone Carrier for Text: \_\_\_\_\_

**(See Texting instructions on bottom of page 1)**

Language(s) spoken at home other than English: \_\_\_\_\_

I give my permission to have my child's pictures published in a public newspaper, parish bulletin, and/or on the parish website and social media sites. YES \_\_\_ NO \_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**IMPORTANT**

The success of our Religious Education Program relies on the generosity of time and talent of our adult volunteers. You are encouraged to help us with the following positions:

\_\_\_ Catechist (Lead Teacher)     \_\_\_ Assistant Catechist (Teacher's Aide)     \_\_\_ Substitute Catechist

**REGISTRATION FEES**

Religious Education Program fee is \$175 per family. If you want to pay by **Paypal\*** from our website, please go to [stlweehawken.com](http://stlweehawken.com) and click on Registration. You can also pay by check (Saint Lawrence Church).

Please return this Registration form by mail, drop off during office hours or anytime using the Parish Center's mailbox and to the attention of Patricia Mazure.

**\*If you paid online, you can email the registration forms to [pmazure@stlweehawken.com](mailto:pmazure@stlweehawken.com)**

Financial difficulties should never interfere with the religious education of our children. If you have difficulty with the registration fee of our program, please email [patriciamazure@stlweehawken.com](mailto:patriciamazure@stlweehawken.com). All calls and requests for financial help will be confidential.

**ADDITIONAL INFORMATION** Is there any additional information that we need to know about your child? Please specify in the space below.

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