

New Student 2021-2022

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: ___/___/___ Birth Place: _____
First Middle Last Circle One City/State Country

Home Address: _____ Home #: _____ - _____ - _____

School: _____ Grade in September 2020: _____ Religious Education Grade: _____

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

Emergency Contact: _____ Phone #: _____ Relationship to Child: _____
Name City

Sacraments Received:

Baptism Church: _____ Date: _____
Name City/State Country

(If a child was not baptized at STL, please attach a copy of his/her Baptism Certificate.)

Penance Church: _____ Date: _____
Name City/State Country

Eucharist Church: _____ Date: _____
Name City/State Country

Note: The normal Preparation time for a sacrament is 2 years.

If your child attends catholic school it is 1 year.

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: _____

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 above)

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 permission to have my child's pictures published - (YES or NO)

Bulletin Website Facebook

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 The Program fee is \$175 per family. You can pay by check or cash. If you want to pay by Paypal from our website please email reled@stlweehawken.com. Please write check out to Saint Lawrence Church.

Please return the Registration form (Attention of Christine Smith) by mail or anytime using the Rectory door's mailslot.

Financial difficulties should never interfere with the religious education of our children. Please email reled@stlweehawken.com to set up a payment plan or request financial help (always confidential).

****MASS ATTENDANCE****

My child(ren) will attend Mass weekly in order to prepare for the next sacrament.

Parent/Guardian Signature: _____ **Date:** __/__/__