

**RELIGIOUS EDUCATION REGISTRATION FORM**

St. Paul Catholic Church, P O Box 998, Athens, AL 35612

**DATE:** \_\_\_\_\_

**CHILDREN INFORMATION:**

Sacraments already Received (Please Circle):

LAST NAME	FIRST NAME	DOB	GENDER	GRADE	BAPTISM	1 <sup>st</sup> COMMUNION	CONFIRMATION
					Yes No	Yes No	Yes No
					Yes No	Yes No	Yes No
					Yes No	Yes No	Yes No
					Yes No	Yes No	Yes No
					Yes No	Yes No	Yes No

**PARENTS:**

LAST NAME	FIRST NAME	HOME PHONE	CELL PHONE	EMAIL ADDRESS

**ADDRESS:**

STREET	CITY	ZIP

**EMERGENCY CONTACT:** To be used if neither parent can be reached

NAME	PHONE NUMBER

FEE: \$15.00 per child/\$30.00 Max per family      CASH \_\_\_\_ CHECK \_\_\_\_

LATE REGISTRATION (After Sept. 4<sup>th</sup>) \$20 per child/ \$40 per family

ARE YOU REGISTERED MEMBERS OF THE PARISH? YES / NO (Families must be registered St. Paul parishioners to enroll in classes.)

**Please return in collection plate or mail to the church office.**