

St. Paul's Religious Education 2011-2012 CONFIRMATION PROGRAM Registration Form

Class Schedule To Be Announced

Register before May 27, 2011 & Registration Fee is \$30 per child.
Register after May 27, 2011 & Registration Fee is \$40 per child.
Maximum Family Fee is \$100

PLEASE NOTE: FAMILIES MUST BE REGISTERED AT ST. PAUL'S FOR CHILDREN TO ATTEND RELIGIOUS EDUCATION.
CALL 508-883-6726 TO REGISTER WITH THE PARISH.

Family Name (as Registered in Parish): _____

Address: _____

Town/City/Zip: _____

Home Telephone _____

Parent Email: _____

Primary Guardian's Name: _____

Secondary Guardian's Name: _____

Address/Phone(if different from Child's) _____

<u>Name of Student</u>		<u>Church of Baptism</u>
Date of Birth	Grade in Sept '11	School
Father's Name		
Mother's Maiden Name		

____ Baptism Form Submitted

**A copy of your Baptism record must be received prior to the start of classes
in September, unless you were baptized at St. Paul's Blackstone**

**Go, therefore and make disciples of all nations...teaching them to observe
all that I have commanded you. And behold, I am with you always. (MATTHEW 28:19-20)**

Because we are baptized, Jesus calls us to share our faith and gifts with the community. Please prayerfully consider serving your community in one of the following areas:

ROLE

____ Catechist (Teacher)
____ Substitute Catechist

OTHER

____ Event Help: Snacks, Set-up/Break-Down
____ Office Help (during class time)

FOR OFFICE USE ONLY

Amount: _____	Date: _____	Cash: _____	Check# _____
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REGISTRATIONS CAN BE TURNED IN AT CLASS OR MAILED TO:

St. Paul's Church, 48 St. Paul Street, Blackstone, MA 01504 ATTN: DEB CAMPANO

PLEASE TURN OVER

EMERGENCY CONTACT INFORMATION

Emergency Contact Info:
Name: _____
Phone: _____
Relationship to Student: _____

HEALTH INFORMATION

Please list any health conditions which you feel St. Paul's needs to know in order to foster your child's religious education or for the safety of your child, including allergies or any learning disabilities. This information will be used to correctly staff a classroom and make sure enough aides (if any) are needed.

Please circle Yes or No. If YES, please provide details on the lines below.

ALLERGIES

YES

NO

OTHER HEALTH CONDITIONS

YES

NO

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