

# 2005 - 2006 SAINT GALL RELIGIOUS EDUCATION

CHILD'S FIRST & LAST NAME	DATE OF BIRTH	GRADE	SCHOOL	HAS THIS CHILD RECEIVED:			
				BAPTISM		EUCHARIST	
				YES	NO	YES	NO
				YES	NO	YES	NO
				YES	NO	YES	NO
				YES	NO	YES	NO

*IF WE DO NOT HAVE YOUR CHILD'S BAPTISMAL CERTIFICATE ON FILE, PLEASE INCLUDE A COPY WITH YOUR REGISTRATION FORM.*

FOOD ALLERGIES: \_\_\_\_\_

	FIRST & LAST NAME	RELIGION	OCCUPATION
FATHER:	_____	_____	_____
MOTHER:	_____	_____	_____
HOME PHONE #:	_____	EMAIL:	_____
FATHER'S WORK #:	_____	MOTHER'S WORK #:	_____
FATHER'S CELL #:	_____	MOTHER'S CELL #:	_____

**PLEASE MAIL ALL RELIGIOUS EDUCATION INFORMATION TO:**

NAME	MAILING ADDRESS, CITY AND ZIP CODE
_____	_____
_____	_____

EMERGENCY CONTACT PERSON & PHONE # \_\_\_\_\_  
*(OTHER THAN PARENT OR GUARDIAN)*

AREAS OF PARENTAL INVOLVEMENT: TEACHER \_\_\_\_\_ ASSISTANT \_\_\_\_\_ SUBSTITUTE \_\_\_\_\_  
 CONFIRMATION SPONSOR \_\_\_\_\_ FOOD PREP \_\_\_\_\_ OTHER(SPECIFY) \_\_\_\_\_  
 PRE-CLASS SUPERVISION: MONDAY \_\_\_\_\_ TUESDAY \_\_\_\_\_ WEDNESDAY \_\_\_\_\_ THURSDAY \_\_\_\_\_

\*\*\*\*TUITION IS \$75 FOR THE FIRST CHILD, \$15 EACH ADDITIONAL CHILD\*\*\*\*