

New Registration Form

Family fee _____
Date _____
Cash _____ Check _____
Rec'd by _____

St. Mary of the Hills
Religious Education Program
2018-19

Family Name _____	Home Phone _____
Address _____	Town & Zip _____
Email _____	
Mother's First Name _____	Mom's Cell _____
Mother's Maiden Name _____	Religion _____
Father's First Name _____	Dad's Cell _____
Father's Religion _____	

Are you okay to receive texts on your cell phone for cancellations? _____

Emergency Information:

Please give the names & daytime phone numbers for two people who could pick up your child in the event of illness or minor injury if you cannot be reached.

1. _____ Phone _____
2. _____ Phone _____

Please describe any medical issues, allergies, academic/behavioral difficulties of which our catechists/teachers should be aware.

Child's First Name _____	Grade (In Sept.) _____
Date of Birth _____	Place of Birth _____
Church of Baptism _____	Location _____
Date of Baptism _____	Baptismal Certificate _____
Date of Reconciliation _____	Date of First Eucharist _____

NOTE: If this child was not baptized at St. Mary of the Hills, this registration form will not be processed without a copy of their Baptismal Certificate.