

# RELIGIOUS EDUCATION REGISTRATION FORM FOR GRADES K-6

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Email address \_\_\_\_\_

Are you a registered member of St. Mary Parish? \_\_\_\_\_

1. Child \_\_\_\_\_ Grade \_\_\_\_\_

2. Child \_\_\_\_\_ Grade \_\_\_\_\_

3. Child \_\_\_\_\_ Grade \_\_\_\_\_

4. Child \_\_\_\_\_ Grade \_\_\_\_\_

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In order to better enable the teacher to serve the needs of your child(ren), please note any learning disabilities, health problems or special circumstances the teacher should be aware of:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This is your opportunity to get involved in your child's religious education. Please consider what you can do to help!

I am interested in volunteering my services for:

\_\_\_\_\_ Teaching (grade preferred)

\_\_\_\_\_ Substitute teaching