

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 _____

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:

I promise to do my best at raising my child in the Catholic faith. I understand that this includes attending Mass on Sundays and Holy Days of Obligation. My child will attend ALL Religious Education classes and I will discuss with my child what they learned at class. In addition to, living the faith and praying at home with them.

Parent/Guardian signature _____ Date _____

In the event of an emergency, I give permission for St. Mary staff and/or volunteers to secure whatever medical attention necessary for my child(ren). I understand that the St. Mary staff and/or volunteers will make every effort to contact the parent/guardian listed above.

Parent/Guardian signature _____ Date _____

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