

ST. ELIZABETH CATHOLIC CHURCH  
2023 - 2024 Religious Education Registration

Please fill this form out completely.

Student's Name: \_\_\_\_\_ M/F \_\_\_\_\_  
Last First

Address: \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Grade in school: \_\_\_\_\_ First Communion 1st yr \_\_\_\_\_ First Communion 2nd yr \_\_\_\_\_  
(1st grade or older) (Must have completed 1st yr of instruction)

Other classes \_\_\_\_\_ Confirmation 1st Yr \_\_\_\_\_ Confirmation 2nd Yr \_\_\_\_\_  
(3rd - 6th grade) (7th grade or older) (Must have completed 1st yr of instruction)

Emergency Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship \_\_\_\_\_ Health Issues: \_\_\_\_\_

Student lives with: Both Parents \_\_\_\_\_ Mother only \_\_\_\_\_ Father only \_\_\_\_\_ Other person \_\_\_\_\_

Student's Information

Birth Date: \_\_\_\_\_ Birth City, State: \_\_\_\_\_

Baptism Date: \_\_\_\_\_ Church of Baptism: \_\_\_\_\_

Address of Church: \_\_\_\_\_ City/ST/Zip: \_\_\_\_\_

Birth Certificate  Baptism Certificate Required at registration if 1st yr or new

First Communion and ~~Confirmation Certificate~~ Required from parish received if new

Parents' Information

Mother's Name: \_\_\_\_\_  
Include Maiden Name

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City/Zip: \_\_\_\_\_

City/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Phone \_\_\_\_\_

Date	Amt. Pd.	Note: