

**Sacred Heart / Saint Bernard Parishes -
Student Registration for Religious Education**

FULL NAME OF STUDENT: _____

DATE OF BIRTH: _____ AGE: _____ GRADE: _____ GENDER: M F

PLACE OF BIRTH: _____

IF YOUR CHILD HAS RECEIVED ANY SACRAMENTS, PLEASE INCLUDE YEAR, CHURCH AND CITY. PLEASE ATTACH CERTIFICATES TO THIS FORM.

BAPTISM: _____

FIRST COMMUNION: _____

HOW MANY YEARS HAS YOUR CHILD ATTENDED RELIGIOUS EDUCATION? _____

REGISTERED PARISH: Saint Bernard Sacred Heart Other: _____

IF YOUR CHILD WILL BE RECEIVING FIRST HOLY COMMUNION THIS YEAR, WHICH CHURCH WOULD YOU PREFER? Saint Bernard Sacred Heart

FATHER/GUARDIAN NAME: _____

MOTHER/GUARDIAN NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____
Home Work/Cell (Father) Work/Cell (Mother)

EMAIL ADDRESS: _____
Father Mother

RELIGION: FATHER: _____ MOTHER: _____

PRIMARY LANGUAGE OF PARENTS: English Spanish Other: _____

STUDENT'S CLASS INSTRUCTION LANGUAGE: English Spanish

Please email to Kim Farrell sacredsaintccd@gmail.com or deliver to Saint Bernard Church 442-6466 or Sacred Heart 443-8429. Contact Kim at 442-2233 with any questions.

Classes will begin in early October. Information will be in the church bulletin.

Cost: \$50.00 one child/\$80.00 two children/\$100.00 three or more children - Scholarships available

