St. John the Baptist Catholic Church ~ Our Lady of the Assumption Catholic Church Office of Religious Education - Student Registration Form

{Student R	egistration #:	_} * Any field in {brackets} is for Office Use
Family Name	Head of Household: Spo Last Name: First Name: Suffix:	First Name:
Family Information	Street Address Line 2: Geographical Area Number (1 for Telephone: 1) (Zachary-SJB, 2 for Clinton-OLA):; 2) (); 3) () primary number you want us to call, whether or not it is a cell or landline)
Mailing Address	If different from street address:	(P. O. Box, etc.) State Zip Plus4
Student Information	Last Name: First Name: Middle: Nickname: Title: Suffix:	{Mailing Name:} {Informational Salutation:}
{Classes}	Class:	Room: Days:
	Class:	Room: Times: Days:
Personal	Grade:	Type: Gender: Birthdate:
Phone/E-mail:	Phone: () Phone: () Phone: ()	Type:HomeOfficeCellOther Unlisted? Type:HomeOfficeCellOther Unlisted? Type:HomeOfficeCellOther Unlisted?
Remarks:		

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Sacraments:	Birthplace: _				Mothe	ər:			
	Baptism:	Name/Extra Info: _ Date: Performed by: Church name:			Statu	s:			
	Penance:	Name/Extra Info: _			Statu	s:			
	1 st Euch.:	Name/Extra Info: _			Statu	s:			
	Confirmation:	Name/Extra Info: _ Date: Performed by: Church name:			Statu	s:			
Emergency Contact / Birth Parent Information:	Name: Relationship: Address: City/State: Prefer F-mail?	E-mail ad						Zip:	es?
	Marital Status: Religion:			Notes: Type:	 _Home _	Office	Cell _	_Other	
Other Information or Special Instructions:									

Please submit this completed Registration Form with your payment to the Office of Religious Education via mail or by placing in the weekend Mass collection in a separate enveloped marked, "Religious Education." <u>Important: Please contact the Office of Relibious Education if any item included on this Student Record changes</u>. If you have any questions call (225) 654-5885 at St. John's and (225) 603-3870.