## **Fourteen Holy Helpers Religious Education Registration 2021-2022**

Family Name:		Parish:		Ph. #:		Cell #:	
Address:							
			Father's Name:				
Mother's Cell:			Father's Cell:				
Mother's Email:			Father's Email:				
Marital Status: ☐ Single If separated/divorced with of? If, yes, please at	n whom do(es)	the child(ren)	live?			y arrangement	ts we need to be aware
\$50.00 per child. A late f	ee of \$25.00 p	er family will	be charged after S	September 9 <sup>th</sup> .	Sacramental fees a	re assessed in	the fall.
Where did your child(ren)	_		_	_			
Child's First & Last Name	Date of Birth	Religious Grade in '21-'22	Public School Attending in Fall '22	Sacraments Received			al Needs (learning, al, allergies, etc.)
	_			Church Date			
				Baptism:			
				Reconciliation: Eucharist:			
				Baptism:			
				Reconciliation:			
				Eucharist: Baptism:			
				Reconciliation:			
				Eucharist:			
				Baptism: Reconciliation: Eucharist:			
Emergency contact (during	g Faith Formati	on class hours	s):				
Name:		R	elationship:				
Ph #:			.lt. phone:				
Please call me; I am interes						al Events Asst.	
all Students registering for t		•			•		
Office Use: Payment A	mount: \$		□ cash □ chec	ck #	Initial:	_ Date:	