

St. Francis and St. Clare of Assisi Parish at St. Catherine of Siena Church RELIGIOUS EDUCATION PROGRAM (Grades Primary to Six)

2025-2026 Registration Form for Students from Grade Primary to Six

Students:		
1) Name	Date of Birth	Grade
Date of Baptism	Place of Baptism	
2) Name	Date of Birth	Grade
Date of Baptism	Place of Baptism	
3) Name	Date of Birth	Grade
Date of Baptism	Place of Baptism	
4) Name	Date of Birth	Grade
Date of Baptism	Place of Baptism	
5) Name	Date of Birth	Grade
Date of Baptism	Place of Baptism	
Parent(s)/Guardian(s):		
Mailing Address:		
Phone(s):		
E-Mail:		
	on basket, or scanned and returned to offic	
I give my permission for the above-named St. Francis and St. Clare of Assisi Parish at S	child/children to attend the Religious Educa St. Catherine of Siena Church.	ition Program of
	Date:	
Signature of Parent or Guardian		

MEDICAL INFORMATION: Please indicate any information concerning your child's health that we
should be aware of – allergies, medical conditions, etc.
CHILD PHOTO/VIDEO CONSENT FORM
I give St. Francis and St. Clare of Assisi Parish permission to take photographs and/or video of my child/children.
I grant St. Francis and St. Clare of Assisi Parish full rights to use the images resulting from the photograph/video filming, and any reproductions or adaptations of the images for fundraising, publicity or other purposes to help achieve the group's aims.
This might include (but is not limited to), the right to use them in printed and online publicity, social media, press releases, and fundraising applications.
Date:
Signature of Parent or Guardian
WE WELCOME YOUR ASSISTANCE!
The success of any program depends upon parental support. Please indicate any areas where you would be willing to help with our program:
Catechist
Substitute
Assistant
Assist with one event