

**Religious Education Registration Information  
Holy Family Catholic Church  
2018 – 2019**

Please include all information.  
It is important to ensure that we have the most up-to-date information.

**RELIGIOUS EDUCATION REGISTRATION**

**PARENT INFORMATION**

Family Name:

Mother:

Father:

Email:

Current address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Alt. Cell:

Preferred Method of Contact:

**STUDENT INFORMATION**

Name of Student

Grade in 2018-2019:

Date of Birth:

Name of Student

Grade in 2018-2019:

Date of Birth:

Name of Student

Grade in 2018-2019:

Date of Birth:

Name of Student

Grade in 2018-2019:

Date of Birth:

**EMERGENCY CONTACT**

Name of Contact:

Address:

Phone:

City:

State:

Zip Code:

Relationship:

**MEDICAL CONCERNS/ ALLERGIES:**

Allergies:

Medical Issues/Medications: