

## 2017 - 2018 CCD REGISTRATION FORM

All grades registration fee is \$30.00 per child+++++++Fee per family of two or more is \$50.00  
Late registration after September 3 is \$40.00 per child and \$60.00 per family.

\*\*REMEMBER THAT EACH CHILD MUST HAVE THEIR OWN REGISTRATION FORM. \*\*

NAME: \_\_\_\_\_ GR. IN SEPT. 2017 \_\_\_\_\_ SCHOOL \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ CITY AND STATE OF BIRTH \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ MOTHER'S NAME \_\_\_\_\_ MAIDEN NAME \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ CELL \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ IS THIS A NEW ADDRESS? \_\_\_\_\_

TO ENSURE THE ACCURACY OF PARISH RECORDS, DO YOU RECEIVE YOUR PARISH  
SUPPORT ENVELOPES? YES NO

TO ENSURE THE ACCURACY OF OUR CCD RECORDS, PLEASE GIVE NAMES AND GRADES OF  
OTHER CHILDREN IN YOUR FAMILY IN THIS CCD PROGRAM.

SACRAMENTAL INFORMATION - please give name/city/state/ if child has received.  
(If your child is in grade 3 or higher and has not received these Sacraments, please indicate this  
clearly so that your child may receive them in a special preparation class this year.)

Church name where  
sacrament received.

BAPTISM \_\_\_\_\_

FIRST EUCHARIST \_\_\_\_\_

RECONCILIATION(PENANCE OR CONFESSION) \_\_\_\_\_

### EMERGENCY INFORMATION

WHO SHOULD BE CONTACTED IN CASE OF EMERGENCY? THE RELIGIOUS EDUCATION  
OFFICE MUST CONTACT A RESPONSIBLE ADULT WHO HAS BEEN DELEGATED BY THE  
PARENT. PLEASE NAME THAT PERSON WHO WOULD COMFORT AND CARE FOR YOUR  
CHILD AND HAS THE AUTHORITY TO TRANSPORT YOUR CHILD IF NEED BE.

NAME \_\_\_\_\_ PHONE NUMBER \_\_\_\_\_

RELATIONSHIP TO THE CHILD \_\_\_\_\_

ADDRESS \_\_\_\_\_

### INDIVIDUAL LEARNING NEEDS/MEDICAL CONDITIONS/MEDICATIONS/ALLERGIES

PLEASE EXPLAIN ANYTHING THAT SHOULD BE MADE KNOWN TO THE TEACHERS  
AND STAFF. CONTINUE ON BACK OF THIS PAGE IF NEEDED.