St. Augustin Religious Education Registration/Contact Information Form Sept 2023- May 2024

Can you help out as a t	teaching assistant/class help	er?	please circle: Y, N		
Student 1 st name	Student last name	e	Grade entering		
Date of baptism (note for 2 nd graders: μ	parish name or parish name or please include a <i>copy</i> of baption	•	child was baptized ou	tside of St Augustin's)	
father's first name	father's last name	mother's 1	first name		
home street address		city	state	zip code	
home phone	home em	nail (PLEASE PRIN	NT SO I CAN ADVISE OF	CLASS CANCELLATIONS	
emergency contact pe	rson name	emergeno	emergency contact phone #		
What allergies does yo	ur child have, if any? ("none"	or state allergy)			
Does your child have a	ny special learning needs ? (if	yes, please note	e)		
Besides yourselves (usu	ually father, mother, or grand	lparent) please s	tate others you author	ize to pick up your	