SAINT BENEDICT CATHOLIC CHURCH
CATECHESIS REGISTRATION
2022-2023

Parent/Guardian Information (Please fill out completely)   Today's Date _____

FATHER   **MOTHER**

_____   _____

Address: _____   Address: _____
City: _____ Zip: _____   City: _____ Zip: _____
Email Address: _____   Email Address: _____
Home Phone: _____   Home Phone: _____
Cell Phone: _____   Cell Phone: _____
Religion: _____   Religion: _____
Marital Status: _____   Marital Status: _____

Are you registered at St. Benedict Catholic Church: Yes_____   No_____

Stewardship

I would like to volunteer for the following: (Please check all that apply)

Catechesis Teacher ____   Youth Ministry Retreat/Rallies ____

Catechesis Teacher Aide ____   Youth Ministry Service Opportunities ____

Catechesis Substitute Teacher ____   Youth Ministry Adult Mentor ____

Parish Faith Night Volunteer Speaker ____   Parish Faith Night Food Prep ____

Please contact me about other opportunities ____

1st Student
Last Name: _____ First Name: _____ Age: _____
Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____
Sacraments received (Y/N): Baptism ___   Reconciliation ___ 1st Communion ___ Confirmation: ___
Previous Catechesis at: (Name of Parish/Years) _____
Allergies/Health Considerations: _____

_____

2nd Student
Last Name: _____ First Name: _____ Age: _____
Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____
Sacraments received (Y/N): Baptism ___   Reconciliation ___ 1st Communion ___ Confirmation: ___
Previous Catechesis at: (Name of Parish/Years) _____
Allergies/Health Considerations: _____

_____

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3rd Student

Last Name: _____ First Name: _____ Age: _____

Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____

Sacraments received (Y/N): Baptism ___ Reconciliation ___ 1st Communion ___ Confirmation: ___

Previous Catechesis at: (Name of Parish/Years) _____

Allergies/Health Considerations: _____

_____

4th Student

Last Name: _____ First Name: _____ Age: _____

Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____

Sacraments received (Y/N): Baptism ___ Reconciliation ___ 1st Communion ___ Confirmation: ___

Previous Catechesis at: (Name of Parish/Years) _____

Allergies/Health Considerations: _____

_____

5th Student

Last Name: _____ First Name: _____ Age: _____

Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____

Sacraments received (Y/N): Baptism ___ Reconciliation ___ 1st Communion ___ Confirmation: ___

Previous Catechesis at: (Name of Parish/Years) _____

Allergies/Health Considerations: _____

_____

6th Student

Last Name: _____ First Name: _____ Age: _____

Birth Date: _____ Gender: _____ Grade 2022-23: _____ School: _____

Sacraments received (Y/N): Baptism ___ Reconciliation ___ 1st Communion ___ Confirmation: ___

Previous Catechesis at: (Name of Parish/Years) _____

Allergies/Health Considerations: _____

_____