

Date: _____

Parish Registration #: _____

St. Mary's Catholic Church

RELIGIOUS EDUCATION APPLICATION

Program: Confirmation RCIA (Un-Baptized) **Program Language:** English Spanish

Program Day: Tuesday (English) Wednesday (Español)

ADULT GENERAL INFORMATION

Students Name: _____ Age (now): _____

Complete Address: _____

Phone numbers: _____
Cell # _____ Emergency Contact # _____ Emergency Contact # _____

E-mail Address: _____ Preferred Contact: Email Phone Mail

Marital Status: Single Married Divorced Widow Marital Relationship (not married)

Date of Birth: _____ Place of Birth: _____

Date of Baptism: _____ Place of Baptism: _____

Other family members enrolled in the program (specify name and relationship):

Allergies: _____

Do you have a handicap or special Need that requires assistance: _____
(Please be specific, for example OCD, ADD, ADHD or has a learning disability IEP)

What Mass time do you attend: _____

For Sacramental Records please provide: PARENT INFORMATION

Father Name: _____ Mother Name: _____

_____/_____/20____

Signature of Adult Student

Date

*****OFFICE USE ONLY*****

New/ Returning/Transfer Total fee: \$ _____ PIF/PYMT Unregistered fee: _____

Today's date: _____ Payment Amount: \$ _____ Receipt # _____

Today's date: _____ Payment Amount: \$ _____ Receipt # _____

Baptismal Certificate: Y/N F/up Date: _____ If unbaptized, Birth Certificate: Y/N

Eucharist Certificate: Y/N F/up Date: _____

Other Notations: _____

Application and Documents reviewed by: _____ Date: _____

Print Reviewers Name