### ST TERESA PARISH CONFRATERNITY OF CHRISTIAN DOCTRINE 2023-2024 REGISTRATION FORM

# Grades Pre-K – 8 \$25.00 Registration fee per student

### IF YOUR CHILD IS TO RECEIVE A SACRAMENT THIS YEAR, PLEASE INCLUDE A COPY OF THE BAPTISMAL CERTIFICATE.

#### **CHILD'S INFORMATION:**

| Last Name            | First Name _             |                     |
|----------------------|--------------------------|---------------------|
|                      |                          |                     |
| Date of Birth        |                          | Female              |
| Street Address       |                          |                     |
|                      |                          |                     |
| CHILD RESIDES WITH   | FATHER MOTHER _          | BOTH                |
| Present School       |                          | Grade               |
| CIRCLE ALL GRADES AT | TENDED IN CATHOLIC SCHOO | L K 1 2 3 4 5 6 7 8 |
| CIRCLE ALL GRADES AT | TENDED IN A CCD PROGRAM  | K 1 2 3 4 5 6 7 8   |
| PARENT'S INFORMATION | ON:                      |                     |
| Father's Name        |                          | Religion            |
|                      | Father's Email           |                     |
| Mother's Name        |                          | Religion            |
| Mother's Maiden Name |                          |                     |
| Mother's Phone       | Mother's Email           |                     |
| EMERGENCY CONTACT    |                          |                     |
| Name                 | Rela                     | ationship           |
| Home Phone           | Work Phone               | Cell Phone          |

## **SACRAMENTAL INFORMATION**

| <b>BAPTIS</b> | <b>M</b> :    |                         |                             |        |  |
|---------------|---------------|-------------------------|-----------------------------|--------|--|
| YES           | NO            | Date                    | Church                      |        |  |
| City          |               | State                   |                             |        |  |
| RECON         | CILATIO       | N:                      |                             |        |  |
| YES           | NO            | Date                    | Church                      |        |  |
| City          |               |                         | State                       |        |  |
| EUCHA         | RIST:         |                         |                             |        |  |
| YES           | NO            | Date                    | Church                      |        |  |
| City          |               |                         | State                       |        |  |
| CONFIR        | RMATION       | :                       |                             |        |  |
| YES           | NO            | Date                    | Church                      |        |  |
| City          | State         |                         |                             |        |  |
| I             | would like    | to teach a CCD class    | I would like to assist a te | eacher |  |
| I am inte     | rested in the | e following:            |                             |        |  |
| Preschoo      | 1 P           | Primary School          | Middle School Junior High   | -      |  |
| Any help      | you can gi    | ve is deeply appreciate | d.                          |        |  |
| Lucianne      | Lilienthal,   | Ph.D.                   |                             |        |  |

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