

# St. John the Evangelist School of Religion

## 2021-2022 ~ Registration form

Child's First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Pub. Sh. Grade \_\_\_\_\_ Age \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail Address \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Baptism (Church) \_\_\_\_\_ City/State \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_  
Maiden Name \_\_\_\_\_

Guardian's Name (If different) \_\_\_\_\_

Other siblings in program \_\_\_\_\_  
(Name and grade) \_\_\_\_\_

Has this child received First Reconciliation? Yes \_\_\_\_\_ No \_\_\_\_\_

Has this child received First Communion? Yes \_\_\_\_\_ No \_\_\_\_\_

Has this child received Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_

Parent/Guardian's comments or concerns. For example, please list any special needs you child may have. \_\_\_\_\_

Are you a returning student? 1 Child \$75.00 Amount Due \_\_\_\_\_  
Yes \_\_\_\_\_ No \_\_\_\_\_ 2 or more \$80.00 Amount Pd. \_\_\_\_\_  
Amount owe \_\_\_\_\_

Any child coming for First Communion or Confirmation without prior classes at St. John's will be charged an extra \$10.00