



ST. MARY

CATHOLIC CHURCH | ESCONDIDO
EXPERIENCING CHRIST—LOVING AND SERVING NEIGHBORS

Religious Education Office
1170 S Broadway #215
Escondido, CA 92025
(760) 745-1611
www.stmaryp.org

REGISTRATION FORM FOR THE SACRAMENTS OF INITIATION

Class Schedule (one class per week)

Tuesday 6:30—8:00pm

Special Needs: Saturdays 11:00 am - 12:00 pm

Student's name: _____

Address: _____
Number Street City State Zip Code

Age: _____ DOB: _____ Baptism Date: _____
(Years Old) Month/Day/Year Month/Day/Year

Father's Name: _____
Last Name First Name

Mother's Name: _____
Last Name First Name

Home Phone Number: _____ Cell: _____ email: _____

Married by the Catholic Church? YES ____ NO ____ Would you like to start the process? YES ____ NO ____

Emergency Contact: _____ Phone: _____
Name

School child attends: _____ Grade: _____

Special Needs: NONE ____ YES ____ Students with special needs require parent participation in classes.
Please explain briefly about your child's special needs.

FOR RELIGIOUS EDUCATION OFFICE USE ONLY

First Communion / RCIC

First Year Payment	Classroom #		Second Year Payment		Classroom #	
Envelope #	DATE	PAYMENT	RECEIPT #	DATE	PAYMENT	RECEIPT #
\$100 Feb-July						
Catechists						
Agosto \$120						
\$250, 3 Students						

Copies Provided: Birth Certificate _____ Baptism _____

Parent Signature: _____

Fecha: _____

Classroom First
Year:

Classroom Second
Year: