

**SACRED HEART RELIGIOUS EDUCATION 2019-2020
REGISTRATION FORM**

FAMILY LAST NAME	FATHER'S NAME	MOTHER'S NAME
ADDRESS: _____		
Street/Route/Box	City	State Zip PARENT cell Phone #

EMAIL: _____

<table border="0"><tr><td style="width: 15%;"><u>GRADE</u></td><td style="width: 35%;"><u>CHILD'S NAME</u></td></tr><tr><td>GRADE 1</td><td>_____</td></tr><tr><td>GRADE 2</td><td>_____</td></tr><tr><td></td><td><i>*First Reconciliation and First Communion</i></td></tr><tr><td>GRADE 3</td><td>_____</td></tr><tr><td>GRADE 4</td><td>_____</td></tr><tr><td>GRADE 5</td><td>_____</td></tr><tr><td>GRADE 6</td><td>_____</td></tr></table>	<u>GRADE</u>	<u>CHILD'S NAME</u>	GRADE 1	_____	GRADE 2	_____		<i>*First Reconciliation and First Communion</i>	GRADE 3	_____	GRADE 4	_____	GRADE 5	_____	GRADE 6	_____	<table border="0"><tr><td style="width: 15%;"><u>GRADE</u></td><td style="width: 35%;"><u>CHILD'S NAME</u></td></tr><tr><td>GRADE 7</td><td>_____</td></tr><tr><td>GRADE 8</td><td>_____</td></tr><tr><td></td><td><i>*Confirmation</i></td></tr><tr><td>GRADE 9</td><td>_____ CELL Phone # _____</td></tr><tr><td>GRADE 10</td><td>_____ CELL Phone # _____</td></tr><tr><td>GRADE 11</td><td>_____ CELL Phone # _____</td></tr><tr><td>GRADE 12</td><td>_____ CELL Phone # _____</td></tr></table>	<u>GRADE</u>	<u>CHILD'S NAME</u>	GRADE 7	_____	GRADE 8	_____		<i>*Confirmation</i>	GRADE 9	_____ CELL Phone # _____	GRADE 10	_____ CELL Phone # _____	GRADE 11	_____ CELL Phone # _____	GRADE 12	_____ CELL Phone # _____
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(CELL Phone #'s are necessary for setting up the REMIND Text Alert system – SAME ALERTS SENT TO H.S. STUDENTS AS PARENTS.)

FEE: \$25/family for Kindergarten-Fifth Grade Family Formation AND/OR \$25/family for 6th-12th Grade Youth programs

"As a Catholic parent I understand that I have a duty and responsibility in passing on the Catholic faith to my children. I take seriously this responsibility and intend to the best of my ability to work with and support my children in learning their Catholic faith."

_____ Parent signature (optional) _____ Parent signature (optional)

***I give permission for my child's photos (no names), videos or other media to be placed on the Sacred Heart School / Parish web site and Sacred Heart Parish and CYO Facebook pages. Yes ___ No ___