

**ST. ELIZABETH CATHOLIC CHURCH
RELIGIOUS EDUCATION REGISTRATION FORM
FAITH FORMATION CLASSES & CONFIRMATION
2020 - 2021 SCHOOL YEAR**

PLEASE PRINT ALL INFORMATION: INFORMATION IS CONFIDENTIAL

FAMILY LAST NAME: _____ **Registered in Parish:** Yes No

PRIMARY EMAIL ADDRESS: _____
(email address checked most often)

FATHER _____
Address _____
City/State/Zip _____
Home E-Mail Address _____
Work E-Mail Address _____
Phone _____ (home) _____ (work) _____ (cell)
Religion _____

MOTHER _____
Address _____
City/State/Zip _____
Home E-Mail Address _____
Work E-Mail Address _____
Phone _____ (home) _____ (work) _____ (cell)
Religion _____

Parents are:

- ___ married
- ___ divorced
- ___ separated
- ___ remarried
- ___ widowed

Child/ren lives with:

- ___ both parents
- ___ father
- ___ mother
- ___ guardian

Time & Talent (please consider volunteering)

- ___ RE Teacher (*grade preferred* _____)
- ___ RE Aide (*grade preferred* _____)
- ___ Substitute Catechist/Aide
- ___ Assist with Wednesday pizza
- ___ Assist with High School ministry
- ___ Assist with and chaperone fun travel events
- ___ Assist with and chaperone ministry events
- ___ Children's Liturgy of the Word Leader
- ___ Childcare volunteer (*for teachers*)

Preferred parent/method of contact? _____

Confirmation Student's cell phone number _____

Confirmation Student's email address _____ (is this checked regularly?)

Any medical conditions and or allergies that we should be aware of for your child/children.

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PLEASE TURN PAGE OVER TO COMPLETE

ST. ELIZABETH'S CATHOLIC CHURCH
207 North Main Street, P.O. Box 307
Dilworth, MN 56529
218-287-2705

FAMILY INFORMATION
2020-2021

Please provide the following information:

FAMILY LAST NAME _____

Father _____ **Mother** _____

<u>Student's Name</u>	<u>Birth Date</u>	<u>Grade</u>
1. _____	_____	_____
Check if received: _____ Baptism If baptized at another _____ Eucharist church, please list _____ Reconciliation where. _____ Confirmation		
2. _____	_____	_____
Check if received: _____ Baptism If baptized at another _____ Eucharist church, please list _____ Reconciliation where. _____ Confirmation		
3. _____	_____	_____
Check if received: _____ Baptism If baptized at another _____ Eucharist church, please list _____ Reconciliation where. _____ Confirmation		
4. _____	_____	_____
Check if received: _____ Baptism If baptized at another _____ Eucharist church, please list _____ Reconciliation where. _____ Confirmation		
5. _____	_____	_____
Check if received: _____ Baptism If baptized at another _____ Eucharist church, please list _____ Reconciliation where. _____ Confirmation		