



Saint Patrick's Church
 P.O. Box W
 Milford, PA 18337
 570.296.7451

Student Registration Form

2011–2012

Please print or type all information.

Family Name: _____

Phone Number: _____ Work Phone (His/Hers): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Do you check email daily: Yes No

Father's Name: _____ Mother's Name (include maiden name): _____

Emergency Contact: _____

Relationship: _____ Phone: _____

I understand that we (parents) are the primary teachers of our children. I understand that my child is to participate at Mass each week and that this experience of weekly worship and fellowship is integral to his/her spiritual growth and well being. I will see that my child is at religious education class on Sundays at 9:30am. It will be my responsibility to pick him/her up at 10:45am. I also understand that all Sacramental candidates will be required to attend a retreat; the date and cost to be determined at a later date.

Date

Parent or Guardian Signature

To help offset the costs of books and supplies, please include a check for the appropriate amount. **Please add \$10 if registering after August 10, 2011.**

\$55 FOR ONE CHILD

\$80 FOR TWO CHILDREN

\$100 FOR THREE OR MORE CHILDREN

FOR OFFICE USE ONLY

Date Received: _____

Check Number: _____ Amount: _____ Cash Amount: _____

Student Registration Form

2011–2012

Student Name: _____

Birthdate: _____ School Attending: _____

Grade (as of Sept. 2011): _____ Age (as of Sept. 2011): _____ Sex: Male Female

Sacraments	Date	Church	Town & State
Baptism			
Penance			
Eucharist			
Confirmation			

Student Name: _____

Birthdate: _____ School Attending: _____

Grade (as of Sept. 2011): _____ Age (as of Sept. 2011): _____ Sex: Male Female

Sacraments	Date	Church	Town & State
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Please include a copy of the Baptismal Certificate if not already on record with the parish. In older grades, please also include the First Holy Communion Certificate and any religious education records from previous churches.

If the teacher should be aware of any special needs (medical, behavioral, etc.) please list here or include a note.

