**SAINT JOHN BERCHMANS CATHOLIC CHURCH**

**RELIGIOUS EDUCATION REGISTRATION**

SCHOOL YEAR: 2021-2022

SCHOOL:

SCHOOL GRADE:

RELIGION GRADE:

1ST COMMUNION CHURCH DATE:

1ST COMMUNION CHURCH:

CERT. YES or NO:

LAST NAME:

FIRST NAME:

MIDDLE NAME:

MALE / FEMALE:

DATE OF BIRTH:

ADDRESS:

CITY / STATE: ZIP CODE:

HOME PHONE: CELL PHONE:

FAMILY EMAIL:

ALLERGIES:

ALLERGIES:

NAME:

FATHER’S NAME:

MOTHER’S NAME:

CENSUS ID:

BAPTISM DATE:

BAPTISM CHURCH:

CERT. YES or NO:

***OFFICE USE ONLY***

AMOUNT PAID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CASH or CHECK #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE PAID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COMMENTS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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