

# Saint Ann's Religious Education Registration

Please submit one form per child by August 1<sup>st</sup>

## Family/Student Information

Student's Name: \_\_\_\_\_ Grade (in September): \_\_\_\_\_ Gender: M / F

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_ City, State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_

Mother's First & Maiden Name: \_\_\_\_\_

Are you interested in becoming a Catechist? (Please circle one)    Yes            No

Day Request (Please circle one):      Monday                      Wednesday                      Sunday

## Sacramental Information

Baptism

Church: \_\_\_\_\_ City: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

First Holy Communion

Church: \_\_\_\_\_ City: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_

## Emergency Contact Information

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Student's Allergies: \_\_\_\_\_

## Payment Information

1 child: \$135

2 children: \$250

3 children: \$355

Payment method (Please circle one): Cash                      Check

Total Paid: \_\_\_\_\_

Please make all checks payable to St. Ann's Church. Mail all forms and checks to:

St. Ann's Church  
781 Smith Road  
Parsippany, NJ 07054