

**INTERPARISH RELIGIOUS EDUCATION PROGRAM  
REGISTRATION FORM 2009-2010**

**PLEASE PRINT CLEARLY**

Today's Date: \_\_\_\_\_

Student Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
yr-mt-day

Sex (M/F): \_\_\_\_\_

Home Parish: \_\_\_\_\_

School: \_\_\_\_\_

Parish Location: \_\_\_\_\_  
City/State

School Grade\*: \_\_\_\_\_ Religion Grade\*: \_\_\_\_\_  
**\*completed as of June 2009**

\*\*\*\*\*

***Child's Sacramental Background***

***Baptism***

***First Communion***

Church: \_\_\_\_\_

Church: \_\_\_\_\_

Location: \_\_\_\_\_  
City/State

Location: \_\_\_\_\_  
City/State

Date: \_\_\_\_\_  
yr-mt-day

Date: \_\_\_\_\_  
yr-mt-day

\*\*\*\*\*

***Person(s) with whom child lives***

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Street: \_\_\_\_\_ Apt # \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Tel Home: \_\_\_\_\_ Email: \_\_\_\_\_

Person to be called in an emergency: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

Emergency Telephone Number: \_\_\_\_\_

\*\*\*\*\*

***Mother***

***Father***

Maiden Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Religion: \_\_\_\_\_

Religion: \_\_\_\_\_

Marital Status of Parents: \_\_\_\_\_

Married/Divorced/Single?

***(See Reverse Side)***