



Seven Dolors Parish 731 Pierre • Manhattan, Kansas 66502 • 785-565-5000

Fall Religious Education Registration Form 2018-2019

FAMILY LAST NAME _____ **PRIMARY LANGUAGE** English Spanish

ADDRESS _____ **HOME PHONE** _____
Street City/State Zip Code

REGISTERED MEMBER OF : Seven Dolors /St Patrick St Thomas More St Isidore Other _____ I would like to register, please call me.

FATHER'S FULL NAME _____ Religion _____

Work phone _____ Cell phone _____ Email _____

If you are Catholic, please check the Catholic sacraments you have received: Baptism Eucharist Confirmation Marriage

MOTHER'S FULL NAME _____ Religion _____

Work phone _____ Cell phone _____ Email _____

If you are Catholic, please check the Catholic sacraments you have received: Baptism Eucharist Confirmation Marriage

The child(ren) currently live with: Both parents Mother only Father only Other

If other, please explain? _____

STUDENT'S FULL NAME	BIRTHDAY (MM/DD/YYYY)	MALE/ FEMALE	GRADE	Has your child received any sacraments? Check below			Current School	T-shirt Size Circle One (9-12 grade only)
				Baptism	1st Communion	Confirmation		

Are you requesting a sacrament for any of the above listed child(ren)? Yes No

If yes, which child? _____ Sacrament? _____

STUDENT PICK UP AUTHORIZATION

Please note: Students in Kindergarten through Third Grade will not be dismissed without a parent or high school sibling.

In the event that I am unable to pick up my child(ren) from Religious Education classes, the following people have my permission to do so:

1. Name _____ Phone Number _____ Relationship to child _____
2. Name _____ Phone Number _____ Relationship to child _____

Parent Volunteer Opportunities

From time to time Religious Education needs help and it is a beautiful witness of faith to your child(ren) by your presence.

If you are able to help in any way, please check your interests below:

Name _____

I could help as: Catechist Room Aide Substitute Office Hall Monitor

Name _____

I could help as: Catechist Room Aide Substitute Office Hall Monitor

REGISTRATION FEES & FORMS

Per child: \$50

Family of three or more: \$120

Please make checks payable to: Seven Dolores Parish

If you need to make payment arrangements, please let us know.

Other Forms needed (can be found on SevenDolores.com website):

- Form B** **HIPAA**

OFFICE USE ONLY

Amount Due: _____ Amount Paid: _____

Fee paid by: Cash Check # _____

Received by: _____

Date received: _____

Baptismal Certificate(s) Yes No

Permission is hereby granted to Seven Dolores Parish for use of photographs of and/or quotations from my child(ren) to assist in community awareness, educational efforts, and related public relations efforts that may include brochures, posters, website, and printed media.

I am the legal parent/guardian of the child(ren) listed on this form and certify that the information provided is correct to the best of my knowledge.

Parent Signature

Printed Name

Date