

2018-2019
ST. MARY CHURCH/ST. JOSEPH CHURCH
RELIGIOUS EDUCATION
FAMILY REGISTRATION FORM

Father's Name _____

Mother's Name _____

Complete Address _____

Home Telephone Number:(_____)_____ - _____ Cell (_____)_____ - _____

E-Mail Address _____

****Communication will be primarily via email, therefore please make sure the email address you share with us is one you check frequently, particularly one you access on weekends.**

Our family is registered at: (circle one)

St. Mary Parish St. Joseph's Parish Another Parish _____

Please list names of children: (name, age, grade)

*****Baptismal certificate from parish of baptism must be submitted for each child.
Once on file, we do not need another copy.**

Allergies (including food) _____

I give permission to have my child photographed: Yes: _____ No: _____

**Have questions? Contact Lisa Sweet, Religious Ed. Coordinator (603)-542-2260 or
claremontfaithformation@gmail.com**