

**Our Lady of the River Parish  
Religious Education Registration  
2016-2017**

**Student's Name** \_\_\_\_\_ **Grade** \_\_\_\_\_

**Birth Date** \_\_\_\_\_ **Age** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Phone Number** \_\_\_\_\_

**E Mail Address** \_\_\_\_\_

**Father's Name** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Mother's Name** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Are you a registered member of Our Lady of the River? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Is a copy of the student's baptismal certificate on file? Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Special information which may be helpful in teaching your child (i.e. hearing, or learning disabilities, poor vision, allergies, etc.)**

**Yes, I give permission for Our Lady of the River Church to use my child's image(s) for parish publications.**

**No, I do not give permission for Our Lady of the River Church to use my child's image(s) for parish publications.**

**Sacraments Received**

**Baptism** \_\_\_\_\_

**First Reconciliation** \_\_\_\_\_

**First Communion** \_\_\_\_\_

**Confirmation** \_\_\_\_\_

**Registration Fees**

**\$30.00-1 child**

**\$50.00-2 children**

**\$70.00-3 or more children**

<b>Office</b>
<b>Cash Amount</b> _____
<b>Check Number</b> _____
<b>Amount Paid</b> _____