



ST. DENIS PARISH RELIGIOUS EDUCATION REGISTRATION 2011-2012

Please return a completed registration form for each child. Thank you.

Name: _____ School: _____ Grade: _____

Address: _____ Home Phone: _____

Home E-mail: _____ *(Registration will be confirmed through e-mail.)*

Father Day Phone: _____ Mother Day Phone: _____

Birthdate: _____ Birthplace: _____ Baptism Date: _____ Church: _____

Father's Name: _____ Mother's Name (Maiden): _____

1st Reconciliation Date: _____ 1st Eucharist Date: _____ Church: _____

Emergency Contact Information: If you cannot be reached, who should be called?

Name	Relationship	Phone
a. _____	_____	_____
b. _____	_____	_____



Does your child have any health problems that we should be aware of in order to assist him or her?

No. If yes, please describe below (learning disability, allergies or medications, etc.):

Payment Information: Check here if payment information completed on sibling form.

\$100 one child	_____
\$150 two children	_____
\$200 three or more children	_____

First Communion materials fee: \$25	+ _____
2 nd year Confirmation materials fee: \$50	+ _____

TOTAL: _____

Please make check payable and mail to:

St. Denis Parish
 2250 Avy Avenue
 Menlo Park, CA 94025
 Questions? Email rlyon.stdenis@gmail.com

TEAM TEACH IN 2011-12

Yes, I am interested in teaching in my child's class during the 2011-12 year. I can help with the lesson:

once a month,
 twice a month,
 every week

Please contact me.

Parent Signature: _____ Date: _____