

Sacred Heart Parish (top part to filled out by office) CENSUS NUMBER \_\_\_\_\_  
Religious Education Program  
North Quincy, MA 02171 DATE REC'D \_\_\_\_\_

**REGISTRATION FORM**  
**2011 - 2012**

AMOUNT \_\_\_\_\_

CHECK \_\_\_\_\_ CASH \_\_\_\_\_

*A copy of a baptismal record is **REQUIRED** when registering new students who were not baptized at Sacred Heart Parish. Please fill in both sides of the registration form.*

**\*Start filling in below this line**  
**Please print neatly**

GRADE IN SEPTEMBER 2011 \_\_\_\_\_  
Male \_\_\_\_\_ Female \_\_\_\_\_

NAME OF STUDENT \_\_\_\_\_  
(Last) (First) (MI)

ADDRESS \_\_\_\_\_  
Number Street City Zip

Home Tel. \_\_\_\_\_ Family email \_\_\_\_\_

Another person's name and number in an emergency \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_ Father's Cell Phone: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_ Mother's Cell Phone: \_\_\_\_\_

Father's full name \_\_\_\_\_  
First Middle Initial Last Religion

Mother's full name \_\_\_\_\_  
First Maiden Name Last Religion

Guardian's full name \_\_\_\_\_

CIRCLE ONE- Student Lives With: Mother & Father - Mother - Father - Guardian

\*Grades of other siblings in our religious education classes \_\_\_\_\_

Has the student being registered received the following Sacraments:

BAPTISM \_\_\_\_\_ HOLY EUCHARIST \_\_\_\_\_ RECONCILIATION \_\_\_\_\_

The following information is for NEW STUDENTS and GRADE 2 Students

Student's date of birth \_\_\_\_\_  
Month Day Year

Date & Place of Baptism \_\_\_\_\_  
Date Church City or Town State

**\* Please turn over and fill in other side of form for All Students**

Places of Previous Religious Education Classes \_\_\_\_\_

Grades Attended \_\_\_\_\_

Name of school student will be attending in September \_\_\_\_\_

Please explain below any information we should be aware of when scheduling classes so that we may better understand the student's needs.

Learning or medical disabilities \_\_\_\_\_

Allergies or any other situation we should be made aware of \_\_\_\_\_

I would prefer my child attending Wednesday classes at S. H. School \_\_\_\_\_

\* I would be open to my child attending class in a neighborhood home \_\_\_\_\_

\* I would be open to my child attending class Sunday morning at the Church \_\_\_\_\_ (1-5)

I would like to instruct my own child at home \_\_\_\_\_ (not for grade 2)

(\* only available if we can get a teacher for this option)

PARENT'S/GUARDIAN/S SIGNATURE \_\_\_\_\_

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**TEACHER REGISTRATION FORM  
2011 - 2012**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

TELEPHONE # \_\_\_\_\_ (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell)

I would like to teach grade \_\_\_\_\_ on Wednesday at the parish school

I would be interested in doing home study with neighborhood children \_\_\_\_\_

grade \_\_\_\_\_ Children's names who might be in my class \_\_\_\_\_

I would be interested in teaching on Sunday Morning \_\_\_\_\_ Grade \_\_\_\_\_

I would like to do one on one or a small group tutoring \_\_\_\_\_ When \_\_\_\_\_

I would be interested in being a substitute \_\_\_\_\_ For grades \_\_\_\_\_

Instead of teaching I will help by: \_\_\_\_\_

I am not sure, please contact me \_\_\_\_\_