

Holy Redeemer Parish

Catechism Program - 204.669.0501 / religious.ed@hrwpg.ca

Home Study Catechism Program Student Registration Form

Please Print

Child's Last Name: _____	First Name: _____	Male / Female (please circle)	Birthdate: month / day / year _____
School Grade in September 2018: _____	in Sept. 2019: _____	in Sept. 2020: _____	
Catechism Grade last completed: _____	at _____ (parish)	in _____ (year)	

Main Family Email Address: _____	Home Phone #: _____
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Home Mailing Address: _____	City: _____	Postal Code: _____
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Father's First Name: _____	Last Name: _____	Religion: _____	Cell Phone #: _____
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Mother's First Name: _____	Last Name: _____	Religion: _____	Cell Phone #: _____
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Guardian's First Name: (if applicable)	Last Name: _____	Relationship: _____	Cell Phone #: _____
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Does your child have any allergies / medical conditions? YES / NC

If yes, please specify: _____

In order to address your child's needs in the Catechism classroom, does he/she have any special

Sacrament Received	Name of Church and City	Date month / day / year
Baptism		
Reconciliation		
First Communion		
Confirmation		

Is your child preparing to receive a Sacrament this year? YES / NO

If yes, please circle which Sacrament:
 First Reconciliation
 First Communion
 Confirmation

Siblings participating in Catechism and Sacramental Preparation:

Siblings Name:	Date of Birth:	Grade in September:		
	month / day / year	2018	2019	2020

Registration fees: \$65 per child

Fees are due upon registration. If paying by cheque, please make cheques payable to Holy Redeemer Parish.

Parent Manual and Session Guide are to be returned to the Catechetical Office by the end of May.
The workbook is to be kept by the student.

Signature for Consent: I have read and agree with the Diocesan/Parish Catechetical Policy. I hereby consent to allow my child's name and/or photos to be used in the Holy Redeemer Catechism Newsletter, Bulletin board and/or our Bulletin, which is posted to Holy Redeemer's Website. I understand that I am allowed to change this consent information at any time by submitting a revised consent form.

Parent/Guardian Signature Parent/Guardian - Print Name Date

Office Use Only:

Payment Date _____ Cash / Cheque # _____ Amount paid: _____ Receipt # _____ Rec. by _____
