

# Holy Redeemer Parish

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

## Sacrament of First Reconciliation \_\_\_\_\_ Student Registration Form

**Please Print**

Child's Last Name: _____	First Name: _____	Male / Female <small>(please circle)</small>	Birthdate: <small>month / day / year</small>
School Grade in September: _____			
Catechism Grade in Fall 2018: _____			
Main Family Email Address: _____		Home Phone #: _____	
Home Mailing Address: _____		City: _____	Postal Code: _____
Father's First Name: _____	Last Name: _____	Religion: _____	Cell Phone #: _____
Mother's First Name: _____	Last Name: _____	Religion: _____	Cell Phone #: _____
Guardian's First Name: <small>(if applicable)</small>	Last Name: _____	Relationship: _____	Cell Phone #: _____

Does your child have any allergies / medical conditions? YES / NO

If yes, please specify: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

In order to address your child's needs in the Catechism classroom, does he/she have any special requirements with respect to behaviour / social situations that the Catechist should be aware of?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Sacrament Received	Name of Church and City	Date <small>month / day / year</small>
Baptism		

\*A copy of the child's Certificate of Baptism is required if he/she was not Baptized at Holy Redeemer.

Registration fee: \$45

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

**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.

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Parent/Guardian Signature	Parent/Guardian - Print Name	Date
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**Office Use Only:**

<b><u>Payment</u></b> Date _____ Cash / Cheque # _____ Amount paid: _____ Receipt # _____ Rec. by _____
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