

# Our Lady of Lourdes Parish – Religious Education

**2017 – 2018**

**Family Last Name** \_\_\_\_\_ Home Phone \_\_\_\_\_ Unlisted? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Father \_\_\_\_\_ Mother \_\_\_\_\_ Lives with: Both \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_  
 Cell # \_\_\_\_\_ Cell # \_\_\_\_\_ Emergency Contact \_\_\_\_\_  
 Mailing Address \_\_\_\_\_ Relationship to child: \_\_\_\_\_  
 Email address \_\_\_\_\_ Emergency Contact Phone # \_\_\_\_\_  
 Step Father \_\_\_\_\_ Phone # \_\_\_\_\_ Step Mother \_\_\_\_\_ Phone # \_\_\_\_\_  
 Alternating visits between parent/step-parent? \_\_\_\_\_ Lessons may be sent home with child for week that will be missed \_\_\_\_\_  
 Special Needs? Allergy, medical, food issues, physical, learning, etc. \_\_\_\_\_ *If yes, please indicate on Medical form –*  
 I understand the information of my child’s special needs will be shared with his/her catechist Yes \_\_\_\_\_

**Sacraments Received: Name of Church**

Name	Date of Birth	Sex	Grade	Baptism	Reconciliation	Eucharist	Confirmation

If any of your children were baptized and/or received First Holy Communion outside of this parish, and have not already supplied us with a copy of each child’s baptismal record, you will need to supply a copy for our files.

Are you a registered member of Our Lady of Lourdes Parish? Yes \_\_\_\_\_ No \_\_\_\_\_ (You MUST be a registered member of our parish if your child will be receiving any of the sacraments. If you need a registration form for the parish, please let us know – we will be happy to supply you with one.)

Fee: \$25/ one child \$20/ each additional child to help defray cost of materials. Please make check payable to Our Lady of Lourdes Catholic Church

If you are a registered member of OLL and need financial assistance, please let us know. This information is kept confidential.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

For office: Date rec’d: \_\_\_\_\_ Amt. \_\_\_\_\_ cash/check \_\_\_\_\_