



Holy Name Parish Religious Education Programme REGISTRATION FORM

Last Name: _____ First Name: _____

Address: _____ City: _____

Postal Code: _____ Phone Number: _____

Date of Birth: _____ Male Female

School Grade in Sept. _____ Last Grade in PREP: _____ Parish: _____

BAPTISM Yes No Date: _____

Name & Address of Church: _____

FIRST COMMUNION Yes No Date: _____

Name & Address of Church: _____

CONFIRMATION Yes No Date: _____

Name & Address of Church: _____

father's Name: _____ Religion: _____

Do You Practice It? Yes No

Mother's Maiden Name: _____ Religion: _____

Do You Practice It? Yes No

Registered at Holy Name? Yes No Envelope # _____

Please state anything that the teacher should know about your child, I.E. allergies, medical conditions, Learning Problems, etc.

Our programme depends on parent involvement. Please indicate your interests.

TEACHER ASSISTANT HALL MONITOR REG. TEAM

BAPTISMAL CERTIFICATE (Photocopy ok) must be presented immediately if your child is to be prepared for the Sacrament of the Eucharist (1st Communion) or the Sacrament of Confirmation.

	PARISHIONER/ENVELOPE USER	NON-PARISHIONER/NON-ENVELOPE USER
Registration Fee:	\$50/1st Child, \$25/2nd Child _____	\$100/1st Child, \$75/2nd Child _____
Special Fee:	\$10/3rd Child, Free/4th Child _____	\$50/3rd Child, Free/4th Child _____
<i>For Subsidy, please make an appointment with Fr. Robert Wong, s.j.</i>	Confirmation or Communion Fee, add \$25	Confirmation or Communion Fee, add \$25
	TOTAL _____	TOTAL _____

Parents Signature: _____ Date: _____