

## Is your child registered for Religious Education?

All children in grades in grades 1-8 and not enrolled in a Catholic school are encouraged to attend classes to learn more about God and our faith and to be prepared to receive the Sacraments of Holy Communion, Reconciliation and Confirmation. Children are required to attend classes for two years before they are eligible to receive First Communion, or Confirmation. All classes are held on Sunday mornings from 10:30 to 11:45. We also have classes for Kindergarten & Pre-K.

Please enclose a copy of your child's Baptismal Certificate for all new registrants. **Fees:** 1 child \$85, 2 children \$125, 3 or more children \$155. Early Bird Discount to new registrants if received by September 20<sup>th</sup>: 1 child \$75, 2 children \$115, 3 or more children \$145. Send Form to: O.L.S. Religious Education, 258-15 80<sup>th</sup> Ave. Floral Park, NY 11004. If you have any questions call the Religious Education Office at (718) 347-3511.

### Our Lady of the Snows Religious Education Program - Registration Form 2009/2010

Today's Date \_\_\_\_\_ Please check one } \_\_\_\_\_ First Time Registration \_\_\_\_\_ Re-Registration

#### STUDENT INFORMATION

Child's First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Male  Female

Address \_\_\_\_\_ City \_\_\_\_\_ State NY Zip \_\_\_\_\_

Child's Date of Birth \_\_\_\_\_ Home Telephone (\_\_\_\_\_) - \_\_\_\_\_ - \_\_\_\_\_  
Month Day Year

Name of Public School child will attend in September \_\_\_\_\_

Public School Grade in September 2009 \_\_\_\_\_ Religious Education Grade in September 2009 \_\_\_\_\_

Please provide any information that might help us in your child's religious formation: e.g. allergies, mediations, IEP, learning or physical disabilities: \_\_\_\_\_

#### HOUSEHOLD/MAILING INFORMATION

How would you like mail sent? Mr. & Mrs./Mr./Mrs./Miss/ Ms. \_\_\_\_\_

MOTHER'S NAME: First \_\_\_\_\_ Maiden \_\_\_\_\_ Last \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Religion \_\_\_\_\_

Address if different from child \_\_\_\_\_

FATHER'S NAME: First \_\_\_\_\_ Last \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Daytime Phone \_\_\_\_\_ Religion \_\_\_\_\_

Address if different from child \_\_\_\_\_

Step-Mother's Name \_\_\_\_\_ Phone \_\_\_\_\_ Step-Father's Name \_\_\_\_\_ Phone \_\_\_\_\_

Is there any special family situation we should be aware of (divorce, serious illness, deaths, etc.): \_\_\_\_\_

**Does either parent** need assistance in receiving a sacrament?  No, we have received the sacraments  Yes, see below

If yes : Parent's Name \_\_\_\_\_  Baptism  Communion  Confirmation  Marriage

#### CHILD'S SACRAMENTS & RELIGIOUS EDUCATION

Baptism: \_\_\_\_\_ No \_\_\_\_\_ Yes Church \_\_\_\_\_ Date \_\_\_\_\_

Penance: \_\_\_\_\_ No \_\_\_\_\_ Yes Church \_\_\_\_\_ Date \_\_\_\_\_

Communion: \_\_\_\_\_ No \_\_\_\_\_ Yes Church \_\_\_\_\_ Date \_\_\_\_\_

Confirmation \_\_\_\_\_ No \_\_\_\_\_ Yes Church \_\_\_\_\_ Date \_\_\_\_\_

Prior Religious Education? \_\_\_\_\_ No \_\_\_\_\_ Yes - Where? \_\_\_\_\_

Where? \_\_\_\_\_ Grade level completed \_\_\_\_\_

**EMERGENCY CONTACT \*REQUIRED** Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Are you a registered parishioner of OLS? \_\_\_\_\_ Yes, \_\_\_\_\_ Env. No. \_\_\_\_\_ No **If no, please complete a Parish Registration Card available in the Parish Office.**

Parent Signature \_\_\_\_\_