

**HOLY NAME PARISH RELIGIOUS EDUCATION  
Registration Form (Pre-K through Grade 11)  
2007-2008**

Child's Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip \_\_\_\_\_

Telephone/Cell Phone: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Father's Full Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address (if different than child's): \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address (if different than child's): \_\_\_\_\_

EMERGENCY CONTACT PERSON: \_\_\_\_\_

Phone/Cell: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Medical conditions we should be aware of (ie. seizures, ADHD, ADD, diabetes, special needs, etc) \_\_\_\_\_

Allergies to foods, bees, etc: \_\_\_\_\_

Date of Baptism & Name of Church at which baptized: \_\_\_\_\_

Number of years attended Religious Education Classes (CCD) and what Grade completed: \_\_\_\_\_

In what way would you like to contribute to your child(ren's) Religious Education?  
Please check as many as you would like:

Catechist     Classroom Assistant     Pageants     Baking

Costumes     Children's Liturgy     Office Helper for DRE

Registration Fee(s): \$30.00 per child or \$60.00 per family (Please make checks payable to Holy Name Religious Education) – mail to:

**Holy Name Religious Education 323 Dickinson Street, Springfield, MA 01108**