



# ST. AUGUSTINE CATHEDRAL

RELIGIOUS EDUCATION REGISTRATION

Date: \_\_\_\_\_

## CHILD'S INFORMATION

*\*The following documents are required: birth certificate, if applicable: baptismal certificate, 1st holy communion certificate. if applying for 2nd year of Religious Education, transferring from another parish; a letter from the Pastor stating 1st year was completed.*

First Name: \_\_\_\_\_ MI \_\_\_\_\_ Last: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade (K-12<sup>th</sup>): \_\_\_\_\_

I am enrolling my child for the following sacraments (Check all that apply):  
 Baptism     1<sup>st</sup> Holy Communion     Confirmation

Please indicate if this will be your child's 1<sup>st</sup> or 2<sup>nd</sup> year of Religious Education:     1<sup>st</sup> Year     2<sup>nd</sup> Year

## FAMILY INFORMATION

Child lives with:     Mother     Father     Both     Other \_\_\_\_\_

### FATHER'S INFORMATION:

First: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### MOTHER'S INFORMATION:

First: \_\_\_\_\_ Last: \_\_\_\_\_

Maiden Name (If Applicable): \_\_\_\_\_

Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

EMERGENCY CONTACT INFORMATION

First: \_\_\_\_\_ Last: \_\_\_\_\_

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

BAPTISMAL GODPARENT/CONFIRMATION SPONSOR INFORMATION

*\*A Godparent/Confirmation Sponsor must submit a copy of all the Sacraments of Initiation, i.e., Baptism, 1<sup>st</sup> Holy Communion and Confirmation, and if married, a copy of their Marriage Certificate issued by the Catholic Church.*

First: \_\_\_\_\_ Last: \_\_\_\_\_

Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DISCLOSURE:

- All information provided is held in confidence and not shared with any unauthorized persons outside of the St. Augustine Cathedral staff.
- I understand my child must attend all weekly classes and attend Mass every Sunday and any other Holy Days of Obligation.
- I understand that my child’s absences may not exceed more than 5 days for the entire year and that they may be required to repeat the class the following year.
- I understand that my child must learn the certain Catholic Prayers and complete weekly homework with the help of the parents to successfully complete the Religious Education year.
- I understand that there will be three Parent Meetings, a Godparent/Confirmation Sponsor Retreat and a Religious Education Confirmation Retreat that are required to receive the Sacraments
- I understand that there are other requirements that must be followed without exception, e.g., dress code, punctuality, photography policy, COVID-19 protocols, etc.

By signing below, I acknowledge I have read and understood this disclosure.

Print Parent’s Name: \_\_\_\_\_ Signature: \_\_\_\_\_

REGISTRATION FEES

**There will be an \$80 fee for each child that is enrolled in Religious Education. Payments may be made in the Parish office, Monday-Friday in the forms of cash, credit/debit card and check or money order made payable to ST. AUGUSTINE CATHEDRAL.**

FEES DUE:

Total Due: \$ \_\_\_\_\_ Paid: \$ \_\_\_\_\_ Balance Due: \$ \_\_\_\_\_

PAYMENT TYPE:

Cash     Credit/Debit     Check/Money order    Check #: \_\_\_\_\_