

**St. Joan of Arc 2009-2010**  
**Religious Education Enrollment form for Kindergarten – 6<sup>th</sup> Grade**

The Parish you are registered in:      St. Joan of Arc      Coal Creek      Other \_\_\_\_\_

**Religious Education classes (day/time options)**

**Sunday** 9:00 – 10:00 AM (Kindergarten only - during Mass)      **Tuesday** 4:30-5:30 PM Kindergarten – 6 grade  
**Sunday** after 9:00 Mass (10:00 ish) – 11:05 AM Kindergarten – 6 grade      **Tuesday** 6:00-7:00 PM Grades 1 - 6  
**Wednesday** 4:30-5:30 PM Grades 1 – 6

**Sacramental Program includes First Reconciliation and First Holy Communion 2<sup>nd</sup> grade and up**  
***This is in addition to regular RE classes. This includes 4 parent classes, 2 morning retreats etc...***

**Child's Name:** \_\_\_\_\_ Grade Fall 2009: \_\_\_\_\_  
Last                      First

Child's Allergies/Special needs: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ RE Day/Time class preference \_\_\_\_\_ Sacramental Program    yes    no

Sacraments child has **already** received: (please circle)    None    Baptism    Reconciliation    First Eucharist    Confirmation

**Child's Name:** \_\_\_\_\_ Grade Fall 2009: \_\_\_\_\_  
Last                      First

Child's Allergies/Special needs: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ RE Day/Time class preference \_\_\_\_\_ Sacramental Program    yes    no

Sacraments child has **already** received: (please circle)    None    Baptism    Reconciliation    First Eucharist    Confirmation

**Child(ren)'s Address:** \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

**Child(ren) live with:**    Both Parents    Mother    Father    Other: \_\_\_\_\_

**Father's Name:** \_\_\_\_\_ Religion: \_\_\_\_\_  
Last                      First

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Mother's Name:** \_\_\_\_\_ Religion: \_\_\_\_\_  
Last                      First

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ Phone: \_\_\_\_\_  
First                      Last

Relationship: \_\_\_\_\_ We will try to contact the parents first in the event of an emergency

**Registration Fees:**

Number of children registered for **Religious Education & Sacramental Program** \_\_\_\_\_ x \$60.00 = \_\_\_\_\_

**Sacramental Program includes First Reconciliation and First Holy Communion 2<sup>nd</sup> grade and up**

*If your child needs to be baptized please contact Sister Margaret*

Number of children registered for **Religious Education only** \_\_\_\_\_ x \$30.00 = \_\_\_\_\_

**Total** \_\_\_\_\_ (Not to exceed \$100)