St Stanislaus Kostka Parish Religious Education Registration

4849 Castle Hayne Rd, Castle Hayne, NC 28429

Family Last Name:							
ather's Name:							
Mother's Name				Mom			
Mother's Maiden:			Eme				
	t from abovo:				-		
custodial Parent, if differen	t iroiii above.				Email:		
						nts Catholic? Y	_ N
Child	Birthdate Sex		Grade	Session	Room Class	3	
Sacrament and Date:	Baptism	Catho	lic?	Eucharist	Penance	Confirmation	า
Special Needs: medical, learn	ing disabilities,	physical	disabilitie	es:			
Child	Birtho	date	Sex	Grade	Session	Room Class	
Sacrament and Date:	Baptism Catholic?		Eucharist	Penance	Confirmation	า	
			no:				•
						_	
Special Needs: medical learn	ing disabilities	physical	disabiliti	95.			
Special Needs: medical, learn	ing disabilities,	physical	disabilitie	es:			
					Sassian	Poom Class	
Special Needs: medical, learn Child	ing disabilities, Birtho		Sex		Session	Room Class	
	Birtho	late	Sex	Grade			
			Sex		Session Penance	Room Class Confirmation	
Child Sacrament and Date:	Birtho Baptism	date Catho	Sex	Grade Eucharist			
Child	Birtho Baptism	date Catho	Sex	Grade Eucharist			
Child Sacrament and Date:	Birtho Baptism	Catho.	Sex	Grade Eucharist es:			n
Child Sacrament and Date: Special Needs: medical, learn Child	Birtho	Catho physical	Sex lic? disabilitie	Grade Eucharist ses: Grade	Penance	Confirmation Room Class	n
Child Sacrament and Date: Special Needs: medical, learn	Birtho Baptism	Catho.	Sex lic? disabilitie	Grade Eucharist es:	Penance	Confirmation	n

Signature:

Tuition Pd: \$_

Tuition due: \$_