

\$25.00 Fee per child:
Preschool through Grade 6

Paid _____ Date _____
Check # _____
Parish ID# _____
For Office Use Only

2009/2010 St. Jude Religious Education

Grades 1 - 6

*** Must be a registered parishioner ***

(NEW) Please provide a copy of your child's Baptism certificate IF you have not done so in 2007/2008 or 2008/2009.

Please Print Clearly

Family Name: _____
Last Parent(s)/Guardian(s)

Address: _____
Street City Zip

Home Phone: _____ Cell: _____

Father's Work _____ Mother's Work: _____

Parent E-mail: _____

Emergency Contact (during class): _____ Phone: _____
Name (non-parent)

In an emergency, who is authorized to pick up your child(ren)? _____

Is there anyone who is NOT authorized to pick up your child(ren)? * _____
*** If there are any custody issues, please contact the Faith Formation office.

I would like to assist with my child's faith formation sessions _____

I would like to assist with organizing supplies _____

I would like to assist with special activities, receptions or events _____

I would like to assist occasionally with a talent such as singing, craft ideas, bulletin boards, etc. _____

My child's photo may be taken/used for St. Jude Religious Education (RE) promotional purposes. No names will be used

I understand that my child's registration information may be made available to St. Jude Staff and RE volunteers.

Parent signature _____ Today's date _____

Complete All Information	Child #1	Child #2
Student's Full Name(First and Middle)		
Last Name (if different)		
Session (Please circle one)	Mon. 4:15 PM or Tue. 7:00 PM	Mon. 4:15. PM or Tue 7:00. PM
Birth Date		
Gender		
Current Grade		
School Attending		
Sacraments Received (Yes/No)		
Baptism		
Eucharist		
Reconciliation		
Confirmation		
Comments/Health/Allergies		

Complete All Information	Child #3	Child #4
Student's Full Name(First and middle)		
Last Name (if different)		
Session (Please circle one)	Mon. 4:15 PM or Tue. 7:00 PM	Mon. 4:15. PM or Tue 7:00. PM
Birth Date		
Gender		
Current Grade		
School Attending		
Sacraments Received(Yes/No)		
Baptism		
Eucharist		
Reconciliation		
Confirmation		
Comments/Health/Allergies		

Please include any additional information that might help us to meet your child/children's needs.

For more information contact:
Mary Kellison - Pastoral Assistant for Faith Formation
(425)883-7685 ext 121 FAX (425)881-2207
MaryK@stjude-redmond.org