Sacred Heart Parish Religious Education Program

2023 – 2024 School Year Registration Form Grades 1st through 8th

P.O. Box 6217, Reading, PA 19610 Phone: 610-374-5430 **Email:** sacredheartreled17@gmail.com

This Registration Form is to be completed and returned to the Religious Education Office with the registration fee(s) and a copy of your child/children's Baptismal Certificate if your child is new to the Program.

Family Last Name		Hon	ne Phone _	hool District Sept.	23-24			
Street			City/StateZip					
Father's Complete Name			City/StateZip					
Father's Occupation			Work Phone #					
Hather's Cell Phone	e#							
Mother's Name (Fi					Religi	on		
Mother's Occupation		Work Phone #						
Marital Status			Work Phone # Mother's Cell Phone#					
F	or emergencies we	e will be	using you	ır E-ma	ıl address.	Please provide l	pelow:	
E-Mail Address (P	lease Print)					Dhone #		
rerson to contact in case of emergency_			Phone #					
	Please comp	lete all i	informa	tion fo	r each cl	hild registering	7:	
First Name (No Nicknames)	Last Name	Boy/ Girl		Rel. Ed. Level	Date of Birth	Health/Beh	avioral/Learning e list all that apply.	
Registration Fee	_		_			_	ld. Sacrament Fees	
-	ious financial diffic						onsignor DeSantis.	
► All 2 nd Level - ► All 7 th Level -						nild.		
Office Use Only:	Date Received: _		# c	of Stude	nts	-		
Check # Total Amount Received: Sacrament						nt Fees: HC	Confirmation	