



MOST HOLY REDEEMER SCHOOL OF RELIGION REGISTRATION FORM

ARE YOU:

- New to the Religious Ed program at MHR? Yes No
- Attending Mass at MHR on a regular basis? Yes No
- A registered parishioner of MHR?
If no, please register at mostholyredeemer.org/welcome Yes No
- Supporting MHR financially through the use of the church envelopes? Yes No

Family Name _____ Mr. and Mrs. Mr. Mrs. Ms. Miss

First _____ Last _____

Phone number where you can be reached _____ Mom Cell Dad Cell Home

Alternate Phone Number to be reached at _____ Mom Cell Dad Cell Home

Home address _____ Family e-mail address _____

SCHOOL MESSENGER IS USED TO CONTACT PARENTS REGARDING SPECIAL EVENTS, RELIGIOUS ED CANCELLATIONS, ETC.

Phone number to be used for Honeywell alerts _____ Mom Cell Dad Cell Home

All program communication is done via email, phone, or the parish website (www.mostholyredeemer.org).

PLEASE SEND COMMUNICATION TO:

Both Parents Mother Only Father Only Other (*specify below*)

Other Parent Name _____

Other email address to send communication _____

Street Address _____

PARENT'S MARITAL STATUS

Married Separated Divorced Widowed Remarried Single

Child Custody

Because MHR assumes responsibility for children in the School of Religion Program, it is important that we are notified of any special court sanctioned arrangements regarding custody of and access to children whose parents are divorced and/or separated.

CHILD LIVES WITH:

Both Parents Mother Only Father Only Mother and Step Father Father and Step Mother

Other, please explain: _____

If divorced or separated, parent with legal custody: _____

CHILD 1

Child's First Name _____ Child's Last Name _____

Child's date of birth _____ Gender _____

City / State of birth _____

School your child attends _____ Grade level _____

Mother's name: First _____ **Maiden** _____

Father's name: First _____ Last _____

Does your child have any medical conditions / allergies we should be aware of?

If yes, please describe briefly _____

Does your child have any major physical disabilities?

If yes, please describe briefly _____

Does your child have any learning disabilities? *(Check all that apply)*

No LD ADD ADHD Speech Hearing Other _____

Does your child have an IEP or 504 plan? If yes, please email a copy of the first page to: SOR@mostholyredeemer.org

If your child needs an aide, are you able to volunteer?

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *	FIRST COMMUNION	RECONCILIATION
<small>Certificate Attached</small>	<small>Certificate Attached</small>	<small>Certificate Attached</small>
Date _____	Date _____	Date _____
Church _____	Church _____	Church _____
City / State _____	City / State _____	City / State _____

** Copy of certificate required if your child was not baptized at MHR, please submit to the Religious Education office*

Was your child enrolled in a Religious Education program last year?

If yes, what parish? _____ Please supply transfer form from previous parish.

MHR staff/volunteers may photograph or videotape my child during Religious Education programs/activities for use of publicity and marketing.

RACE / ETHNICITY OF CHILD			
White	Black or African American	Hispanic or Latino	Asian
American Indian or Alaskan Native		Native Hawaiian or Other Pacific Islander	
Two Or More Races – Persons of two distinct races, e.g., Asian/White; Black/White; Asian/Black, etc. Or not covered by the above			

PLEASE CONTINUE TO INFORMATION FOR CHILD 2 OR SCROLL TO PAGE 6

CHILD 2

Child's First Name _____ Child's Last Name _____

Child's date of birth _____ Gender: _____

City / State of birth _____

School your child attends _____ Grade level _____

Mother's name: First _____ Maiden _____

Father's name: First _____ Last _____

Does your child have any medical conditions / allergies we should be aware of?

If yes, please describe briefly _____

Does your child have any major physical disabilities?

If yes, please describe briefly _____

Does your child have any learning disabilities? *(Check all that apply)*

No LD ADD ADHD Speech Hearing Other _____

Does your child have an IEP or 504 plan? If yes, please email a copy of the first page to: SOR@mostholyredeemer.org

If your child needs an aide, are you able to volunteer?

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *

Certificate Attached

Date _____

Church _____

City / State _____

FIRST COMMUNION

Certificate Attached

Date _____

Church _____

City / State _____

RECONCILIATION

Certificate Attached

Date _____

Church _____

City / State _____

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If yes, what parish? _____ Please supply transfer form from previous parish.

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RACE / ETHNICITY OF CHILD			
White	Black or African American	Hispanic or Latino	Asian
American Indian or Alaskan Native		Native Hawaiian or Other Pacific Islander	
Two Or More Races – Persons of two distinct races, e.g., Asian/White; Black/White; Asian/Black, etc. Or not covered by the above			

PLEASE CONTINUE TO INFORMATION FOR CHILD 3 OR SCROLL TO PAGE 6

CHILD 3

Child's First Name _____ Child's Last Name _____

Child's date of birth _____ Gender: _____

City / State of birth _____

School your child attends _____ Grade level _____

Mother's name: First _____ **Maiden** _____

Father's name: First _____ Last _____

Does your child have any medical conditions / allergies we should be aware of?

If yes, please describe briefly _____

Does your child have any major physical disabilities?

If yes, please describe briefly _____

Does your child have any learning disabilities? *(Check all that apply)*

No LD ADD ADHD Speech Hearing Other _____

Does your child have an IEP or 504 plan? If yes, please email a copy of the first page to: SOR@mostholyredeemer.org

If your child needs an aide, are you able to volunteer?

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *

Certificate Attached

Date _____

Church _____

City / State _____

FIRST COMMUNION

Certificate Attached

Date _____

Church _____

City / State _____

RECONCILIATION

Certificate Attached

Date _____

Church _____

City / State _____

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American Indian or Alaskan Native		Native Hawaiian or Other Pacific Islander	
Two Or More Races – Persons of two distinct races, e.g., Asian/White; Black/White; Asian/Black, etc. Or not covered by the above			

PLEASE CONTINUE TO INFORMATION FOR CHILD 4 OR SCROLL TO PAGE 6

CHILD 4

Child's First Name _____ Child's Last Name _____

Child's date of birth _____ Gender: _____

City / State of birth _____

School your child attends _____ Grade level _____

Mother's name: First _____ Maiden _____

Father's name: First _____ Last _____

Does your child have any medical conditions / allergies we should be aware of?

If yes, please describe briefly _____

Does your child have any major physical disabilities?

If yes, please describe briefly _____

Does your child have any learning disabilities? *(Check all that apply)*

No LD ADD ADHD Speech Hearing Other _____

Does your child have an IEP or 504 plan? If yes, please email a copy of the first page to: SOR@mostholyredeemer.org

If your child needs an aide, are you able to volunteer?

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *

Certificate Attached

FIRST COMMUNION

Certificate Attached

RECONCILIATION

Certificate Attached

Date _____ Date _____ Date _____

Church _____ Church _____ Church _____

City / State _____ City / State _____ City / State _____

** Copy of certificate required if your child was not baptized at MHR, please submit to the Religious Education office*

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Volunteer information is found on the following page, if you need to register more children, please submit by re-downloading this form.

VOLUNTEER INFORMATION

We depend heavily on the help of our parents!

All families are scheduled to help patrol the parking lot one evening. Names are posted in the monthly newsletter and on our website <http://www.mostholyredeemer.org> click on "Parking Lot Schedule". You will be contacted through Honeywell the day prior to your scheduled evening. Please report to the office at 7pm and sign in. You will be given instructions at that time.

From the list below, please choose area(s) and check where we can count on you for help! We will be in touch to coordinate our needs with your availability. Don't hesitate to call us with any questions!

- Catechist Aide
- Substitute Catechist
- Vacation Bible School Catechist / Music / Crafts
- Help with Children's Liturgy of the Word one Sunday a month
- Serve on Advisory Board
- Help with special projects i.e. Family Mass, Stations of the Cross, Rosary, etc.
- Music — play piano, guitar, or liturgical dance
- Service Project Donations
- Supervising children as hall and door monitor
- Emergency help for parking lot

Name _____

Phone Number _____

Email Address _____

Thank you for registering your child to be a part of the Most Holy Redeemer School of Religion!

Please check your drafts folder when you submit to ensure the email has been sent from your email browser. If you are encountering trouble, you may always select "save as" and attach via email to tenright@mostholyredeemer.org.