MOST HOLY REDEEMER | SCHOOL OF RELIGION

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_____

HONEYWELL 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: _____

PLEASE CONTINUE YOUR CHILD(REN)'S INFORMATION ON PAGE 2

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

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *	**FIRST COMMUNION**	**RECONCILIATION**
Certificate Attached ☐	Certificate Attached ☐	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*

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. Yes

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 you 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.*

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

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

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *	**FIRST COMMUNION**	**RECONCILIATION**
Certificate Attached ☐	Certificate Attached ☐	Certificate Attached ☐
Date _____	Date _____	Date _____
Church _____	Church _____	Church _____
City / State _____	City / State _____	City / State _____

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

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

Other pertinent information: _____

SACRAMENTS RECEIVED:

BAPTISM *	**FIRST COMMUNION**	**RECONCILIATION**
Certificate Attached ☐	Certificate Attached ☐	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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MHR staff/volunteers may photograph or videotape my child during Religious Education programs/activities for use of publicity.

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 ☐			

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 _____

Submit to the Religious Education Office

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.