

**Our Divine Savior**  
**Religious Education and Sacrament Preparation Registration**  
**Second Grade through Jr High**

Student's Name: M/F \_\_\_\_\_ Birthday \_\_\_\_\_

**Please circle your preferred class time:      Sunday 10:05-10:50AM      Wednesday 7:00-8:00PM**

Sacrament Preparation class will **also** be the 2<sup>nd</sup> Thursday each month September-April

Please list below name(s) of parents or guardians with whom the student lives. Include the last name.

Father's or step-father's name \_\_\_\_\_

(Please circle)

Religious Affiliation \_\_\_\_\_ Church \_\_\_\_\_

Mother's or step-mother's name \_\_\_\_\_

(Please circle)

Religious Affiliation \_\_\_\_\_ Church \_\_\_\_\_

Guardian's name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

In case of emergency during Religious Education classes please contact **(MUST be different then parents)**:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Please circle those sacraments which the student has received:

Baptism: YES NO First Reconciliation: YES NO First Communion: YES NO Confirmation: YES NO

\_\_\_\_\_ I am interested in helping in the classroom as a teacher, helper, or substitute

\_\_\_\_\_ I would like information about Adult Faith Formation opportunities

\_\_\_\_\_ I would like information about other Parish ministries ie: Lector, Eucharistic Minister, Usher, RCIA team, Choir, Altar Servers, etc.

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A *special offering* of \$50 is encouraged for Sacrament Preparation.

Attach a copy of your child's baptism certificate in order to participate in Sacrament Preparation.

Orientation for Sacrament Preparation is Thursday, September 8<sup>th</sup> 6:00-7:30PM.