

**St. Patrick's Religious Education
New Student Information Form
2017-2018 School Year**

***New
Students***

Student's Full (Baptized) Name (we need the full, complete name from Baptism certificate):

First: _____ **Middle:** _____ **Last:** _____

Nickname: _____ **Male** _____ **Female** _____

Home Phone: _____ **Parent Email:** _____

Family Information:

Family Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

If other family members are currently in the program skip to Student Information section.

Father's Full Name: _____ Religion _____

Father's work Phone: _____ Father's Cell phone: _____

Mothers Name: _____ Maiden Surname: _____

Mother's work phone: _____ Mother's cell phone: _____

Mother's Religion: _____

Emergency Contact: (Other than parent)

Name _____ Phone _____

Cell _____

If you are not a registered St. Patrick's parishioner please contact the Parish Office for a registration form. (914) 234-3344.

Please complete page two →

Student's Name: _____

Student Information:

Date of Birth: _____ City and State of Birth: _____

Current Grade in School: _____

Name of School attending in **Sept 2017**: _____

Sacrament Information:

A copy of the Certificate of Baptism must be presented.

Date of Baptism: _____ Name of Church Baptized in: _____

Street address of Church Baptized in: _____

City: _____ State: _____ Zip: _____

We must have exact address for Church of Baptism since we will be sending them records as Sacraments are made. Please include street address and Zip Code.

If the new student has received prior Religious Education and the Sacraments of Reconciliation or First Holy Communion please provide this information and formal documentation from the Parish where they were received.

Grades of RE completed: _____ Dates _____

Parish where student took RE Classes: _____ Phone: _____

First Penance: Date: _____ Church: _____

Full Mailing Address: _____

Holy Communion: Date: _____ Church: _____

Full Mailing Address: _____

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For Office Use Only:

Date: _____ **Parishioner** _____