

IHM RELIGIOUS EDUCATION NEW STUDENT REGISTRATION FORM

(please print clearly)

Grade _____

Student's Baptismal Name: _____

First Middle Last

Date of Birth: _____ Student's Nickname: _____

Mailing address: _____

Email: _____

Parents/Guardians:

Name: _____ Home Phone: _____

Cell Phone: _____

Name: _____ Home Phone: _____

Cell Phone: _____

| Sacramental History: | Yes/No | When | Where |
|-----------------------------|--------|------|-------|
| Baptism | | | |
| Reconciliation (Confession) | | | |
| Holy Communion | | | |
| Confirmation | | | |

**We must have a copy of each student's Baptismal Certificate for our records. If your child was NOT Baptized here at Immaculate Heart of Mary AND you have NOT submitted the certificate with a previous registration, please include his/her Baptismal Certificate with this form. We will photocopy it and return the original to you.

Photographs: A photograph of your child may be taken for use in the classroom, for celebration posters in the Gathering Area of the church and/or on the parish website.

IN CASE OF AN EMERGENCY:

During class I can be reached at _____

Person to contact if parent cannot be reached: _____

Relationship to child: _____ Phone: _____

Doctor: _____ Doctor phone: _____

In case of a medical emergency in which neither parent/guardian can be reached, I _____, authorize treatment for my child, _____

and accept full financial responsibility.

Parent signature: _____ Print name: _____ Date: _____

Any other information for your child's teacher (including medical problems, allergies, or special needs):

Please return with tuition payment in the collection basket or mail to:

IHM \$25 for each child \$30 for nonparishioners
 PO Box 1047 \$75 for or more children
 Williston, VT 05495 Checks payable to IHM