



# The Catholic Communities of St. Brendan & St. George

*Religious Education Program*  
2017 - 2018



Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Street Address: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
 City: \_\_\_\_\_ Zip: \_\_\_\_\_ School attending: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Grade in Sept. 2017: \_\_\_\_\_  
 Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
 Cell Phone #: \_\_\_\_\_  
 Mother's Name: *(first name)*: \_\_\_\_\_ *(maiden name)*: \_\_\_\_\_  
 Cell Phone #: \_\_\_\_\_ Religion: \_\_\_\_\_

**Emergency Contact Information:** *(if you cannot be reached)*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relation to child: \_\_\_\_\_

**Child's Sacrament Record** *(Circle YES or NO below):*

**Baptism:** YES Date \_\_\_\_\_ Name & City/State of Church \_\_\_\_\_

NO

**1<sup>st</sup> Penance:** YES Date \_\_\_\_\_ Name & City/State of Church \_\_\_\_\_

NO

**1<sup>st</sup> Communion:** YES Date \_\_\_\_\_ Name & City/State of Church \_\_\_\_\_

NO

***Copies of all completed Sacraments are required (i.e. Baptism and First Communion)***

**Registration Fee:**

\$75.00 One child  
\$50.00 Each additional child

**Office Use Only:**

Paid in Full \_\_\_\_\_  
Payment Plan \_\_\_\_\_  
Check #: \_\_\_\_\_ Cash: \_\_\_\_\_

***Make check payable to: St. Brendan's & St. George Church***

**Return to:** The office of St. Brendan's & St. George  
154 East First Street  
Clifton, NJ 07011