

# Sacred Heart Cathedral

## 2016-2017

### SACRAMENTS FOR TEENS REGISTRATION

Students will meet on Sundays evenings from 4:00PM-5:00PM

#### PARENT / GUARDIAN INFORMATION

Parent / Guardian Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Other Emergency Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Are you registered at Sacred Heart Cathedral? Yes \_\_\_\_\_ No \_\_\_\_\_

Did your child attend Religious Education Classes last year? Yes \_\_\_\_\_ No \_\_\_\_\_

If so where did they attend: \_\_\_\_\_

#### STUDENT INFORMATION

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_ Grade 2016/2017 \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Baptism \_\_\_\_\_ Place of Baptism \_\_\_\_\_ Year of First Communion \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_ Grade 2016/2017 \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Baptism \_\_\_\_\_ Place of Baptism \_\_\_\_\_ Year of First Communion \_\_\_\_\_

Child's Name: \_\_\_\_\_ Age \_\_\_\_\_ Grade 2016/2017 \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Date of Baptism \_\_\_\_\_ Place of Baptism \_\_\_\_\_ Year of First Communion \_\_\_\_\_

If your child was not baptized at Sacred Heart Cathedral and is making their first communion and/or confirmation this year, a copy of their baptismal certificate must be on file by October 28, 2016.

**Registration Deadline: October 2, 2016**

Registration Fees	
Payment is expected at time of registration	
1 Child	\$30.00 _____
2 Child	\$60.00 _____
3 or More	\$80.00 _____
Total:	_____

Sacramental Fees
(turn in with registration Fee)
First Communion + \$10
RCIC + \$10
8 <sup>th</sup> Grade Confirmation + \$10

For Office Use Only
Date Paid: _____
Amt Paid: _____
Check #: _____
Cash: _____
Received by: _____

Registration form can be emailed to pa@shcathedral.com, Mailed or turned in to the cathedral office at 118 N 9<sup>th</sup> st.