

St. Alphonsus Religious Education Registration Form 2011/12

The registration fee for each child is \$35.00 to help off set the cost of their material & supplies. We know and respect that Parents are the primary educators of their children's Faith Formation, and encourage any parents to share their "time, talents and treasures" to continually enrich this program.

(Please complete entire form. We will refer to this form for EMERGENCY information).

Father's Name: _____ Cell #: _____

Home Phone #: _____ Work #: _____

Mother's Name: _____ Cell #: _____

Home Phone #: _____ Work #: _____

Primary Address: _____

City: _____ State: _____ Zip: _____

Father's e-mail: _____

Mother's e-mail: _____

Enrollment Opportunities

- Sunday Good Shepherd 3year to Kind. 9:00 ~ 10:00-am
- Sunday Good Shepherd 1st ~ 3rd grade 10:30 ~ noon
- Sunday 2nd grade First Communion/Reconciliation 10:30 ~ noon
- Sunday 4th ~ 6th grade 10:30 ~ noon
- Sunday Confirmation 10:00 ~ noon
- Sunday Teen Topics 8th ~ high 10:00 ~ noon
- Sunday High School 8th ~ 12th grade
- Wed. Good Shepherd 4year to Kind. 6~7:30pm
- Wed. Good Shepherd 1st ~ 3rd grade 6~7:30pm
- Wed. 2nd grade First Communion/Reconciliation 6~7:30pm
- Wed. 1st, 3rd, 4th, 5th, & 6th grade 6~7:30pm

1

Child's Name: _____

Birth Date: _____ Gender M/F: _____ Grade fall 2011: _____

Baptized yes or no: _____ Place of Baptism: _____

Reconciliation yes or no: _____ Eucharist yes or no: _____ Confirmed yes or no: _____

School attend: _____

Any Leaning disabilities (be specific): _____

Any Allergies? If yes please list: _____

Classes enrolling in (see Enrollment opportunities): _____

2

Child's Name: _____
Birth Date: _____ Gender M/F: _____ Grade fall 2011: _____
Baptized yes or no: _____ Place of Baptism: _____
Reconciliation yes or no: _____ Eucharist yes or no: _____ Confirmed yes or no: _____
School attend: _____
Any Learning disabilities (be specific): _____

Any Allergies? If yes please list: _____

Classes enrolling in (see Enrollment opportunities): _____

3

Child's Name: _____
Birth Date: _____ Gender M/F: _____ Grade fall 2011: _____
Baptized yes or no: _____ Place of Baptism: _____
Reconciliation yes or no: _____ Eucharist yes or no: _____ Confirmed yes or no: _____
School attend: _____
Any Learning disabilities (be specific): _____

Any Allergies? If yes please list: _____

Classes enrolling in (see Enrollment opportunities): _____

4

Child's Name: _____
Birth Date: _____ Gender M/F: _____ Grade fall 2011: _____
Baptized yes or no: _____ Place of Baptism: _____
Reconciliation yes or no: _____ Eucharist yes or no: _____ Confirmed yes or no: _____
School attend: _____
Any Learning disabilities (be specific): _____

Any Allergies? If yes please list: _____

Classes enrolling in (see Enrollment opportunities): _____

All registration and fees due by September 30, 2011.
***Please drop off forms and fees to Office of Faith Formation, the Rectory, or**
mail to our office @ 224 Carrier NE, Grand Rapids, MI. 49505.
Our hours are Monday ~ Thursday 9:30-4:00p.m.
Any questions please call the Office at 616.459.5472