

St. Sebastian Church
Religious Education Program
67 Cole Avenue
Providence, RI 02906

Religious Education Office: 272-6062 ~ Parish Office: 751-0196

msmarie06.stseb@gmail.com

2018-2019 NEW STUDENT REGISTRATION FORM

Date _____

STUDENT INFORMATION

FIRST NAME _____ MIDDLE _____ LAST _____

AGE _____ GRADE _____ SCHOOL _____

DATE AND PLACE OF BIRTH _____

DID YOUR CHILD ATTEND RELIGIOUS EDUCATION CLASSES DURING THE PAST
SCHOOL YEAR? _____ IF YES, WHERE? _____

IS THERE ANY INFORMATION REGARDING YOUR CHILD OF WHICH WE SHOULD
BE AWARE (ALLERGIES, LEARNING DISABILITIES, HEALTH PROBLEMS)?

IN CASE OF EMERGENCY CONTACT:

STUDENT SACRAMENTAL RECORD

**PLEASE PROVIDE THE DATE, NAME, AND CHURCH AND A SACRAMENTAL
CERTIFICATE (IF ST. SEBASTIAN, A CERTIFICATE IS NOT REQUIRED):**

BAPTISM _____

FIRST COMMUNION _____

FAMILY INFORMATION

FATHER'S NAME: _____

ADDRESS: _____

PHONE: _____ RELIGION _____

MOTHER'S NAME: _____

ADDRESS: _____

PHONE: _____ RELIGION _____

MAILINGS REGARDING RELIGIOUS EDUCATION SHOULD BE MAILED TO :

MOTHER _____ FATHER _____ BOTH _____ **E-MAIL ADDRESS:** _____

ARE YOU REGISTERED IN THE PARISH YES _____ NO _____

IF "NO", THEN THE FAMILY **MUST REGISTER** IN ORDER FOR YOUR CHILD TO
ATTEND RELIGIOUS EDUCATION CLASSES. YOU MAY REGISTER BY CONTACTING
THE RECTORY AT 751-0196.

REGISTRATION FEE: \$60 per child