

# CATECHISM REGISTRATION

For Grades K-7 (One Form per Student)

Sacred Heart Catholic Church

254 E. 5th. Ave.

Durango, Colorado 81301

►Registration Fee for all active or inactive parishioners: \$ 50.00 per child, \$ 100.00 maximum per family. This donation will be used to cover all program material expenses. If registration represents a financial hardship for your family, please speak to the pastor.

## REGISTRATION (Please Print Clearly)

First Time Registrant\*

Name of Child: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade: \_\_\_\_\_ Child resides with: \_\_\_\_\_

Does this child have any allergies or health concerns we should know about? \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Sacraments: Please check all the sacraments this child has received.**

**COPY OF BAPTISM CERTIFICATE REQUIRED OF ALL REGISTRANTS**

**COPY OF BIRTH CERTIFICATE IS OBLIGATORY IF CHILDREN ARE NOT BAPTISED**

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

**First Communion:** \_\_\_\_\_  
Name of Church City/State Date

**Confirmation:** \_\_\_\_\_  
Name of Church City/State Date

### **FOR CHILDREN ENROLLED IN CHRISTIAN INITIATION PROGRAM ONLY**

Your child's Church Records will follow them through their sacramental life in the Church.

Please indicate below your child's legal name as it appears on the birth certificates.

\_\_\_\_\_ (Please Print Clearly)

## PARENT/GUARDIAN INFORMATION PARENT GUARDIAN Parents have been SHC Parishioners since: \_\_\_\_\_

Father's Name: \_\_\_\_\_  
Last First Middle Initial

Mother's Name: \_\_\_\_\_  
(Maiden Name) First Middle Initial

(Required)  
E-Mail: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
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### FOR OFFICE USE ONLY

Book & Material Fee \$50.00 per child (All Grades)

Baptismal Certificate Yes  No

Birth Certificate Yes  No

Total Due: \$ \_\_\_\_\_ Parishioner Status Verified: \_\_\_\_\_

Amount Paid: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Receipt # \_\_\_\_\_