

**ST. CATHARINE OF SIENA
PARISH RELIGIOUS EDUCATION PROGRAM**

2330 Perkiomen Avenue
Reading, PA 19606

Registration Form --- Levels 6, 7, and 8

Please complete the entire Registration Form and return it along with the fee to the coordinator
At your earliest convenience.

Student Name _____ M F Level _____
(Last Name) (First Name)

Name of Parent Mr./Mrs. _____ P'mt Rec'd _____
(Last Name) (First Name)

Address _____
(Street)

_____ Phone _____
(City) (Zip)

Date of Birth _____ Place of Birth _____

School Attending _____

Parish Where Family is Registered _____

Father's Name _____ Religion _____

Mother's Name _____ Religion _____

Baptismal Date _____ Church _____

Address _____

Sacraments received (check): _____Penance _____Holy Eucharist _____Confirmation

Health problems or concerns: _____

Family Background: ___Married ___Separated ___Divorced
 ___Remarried ___Single Parent ___Widowed

Email Address: _____

REGISTRATION FEE: **1 Child-----\$70.00** **3 Children---\$160.00**
 2 Children--\$120.00 **4 Children---\$190.00**

Lorraine Gajewski, Junior High Coordinator - Home Phone 610-779-4499.

I would like to volunteer: _____
(Name) (Phone) (Capacity)