

GRADE 2-9 REGISTRATION FORM
ST. PIUS X CATECHETICS 2008-2009

CHILD'S Full Name: _____
(PLEASE PRINT)

Catechism grade attended 2007-08 _____

Both Parent's Full
Names: _____

_____ (_____))
(Please include mother's maiden name in brackets

Mailing Address(es): _____

Phone Numbers:

Home # : _____

Mother's Work: _____

Father's Work: _____

Emergency contact #: _____ (Name _____)

e-mail address: _____

Your child's program requires: Teachers (or Team teachers), Teacher's Aides and Monitors. Which area are you willing to contribute to ensure the success of the program? _____

Name and preference of Family member willing to help:

Health\Learning Issues (please give details): _____

Preferences: _____

(Please indicate if Sunday, Monday or Tuesday classes suit best)

