

St. Thomas More Parish  
Religious Education Registration  
386 Luther Ave., Somerset, MA 02726  
2018 – 2019

Family Last Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mother's Maiden Name: \_\_\_\_\_ Email: \_\_\_\_\_

Custodial Parent, if different from above: \_\_\_\_\_

Home Address: \_\_\_\_\_ Both Parents Catholic? Y \_\_\_ N \_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Emergency Contact (other than parents): \_\_\_\_\_

Emergency Phone Number: \_\_\_\_\_

Student Name: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Gender: M / F  
School: \_\_\_\_\_ Grade: (in Sep 2018) \_\_\_\_\_

Student Name: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Gender: M / F  
School: \_\_\_\_\_ Grade: (in Sep 2018) \_\_\_\_\_

Student Name: \_\_\_\_\_ Birth Date: \_\_\_/\_\_\_/\_\_\_ Gender: M / F  
School: \_\_\_\_\_ Grade: (in Sep 2018) \_\_\_\_\_

**For all NEW and GRADE ONE students, please fill out the information below:**

Has Your Child Received the Following Sacraments:

Baptism: Church: \_\_\_\_\_ Location \_\_\_\_\_ Date: \_\_\_\_\_

Reconciliation: Church: \_\_\_\_\_ Location \_\_\_\_\_ Date: \_\_\_\_\_

Holy Eucharist: Church: \_\_\_\_\_ Location \_\_\_\_\_ Date: \_\_\_\_\_

*Please attach Baptismal Certificate if your child was not baptized here at St. Thomas More Parish*

\*\* If your child has any allergies/medical condition, list below. \*\*

\_\_\_\_\_

\*\* If your child has any special needs, learning disabilities or physical disabilities, please inform the office. \*\*

(This information is confidential)

Fees: 1 child \$50.00 \_\_\_\_\_ 2 children \$75.00 \_\_\_\_\_ 3 or more children \$95.00 \_\_\_\_\_

I would like to be of service in the Religious Education Program as a:

Teacher \_\_\_ Teacher's Aide \_\_\_ Substitute Teacher \_\_\_ Teen Assistant \_\_\_ Office Aide \_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_/\_\_\_/\_\_\_

OFFICE USE ONLY:

Date Received \_\_\_\_\_  
Payment Enclosed \_\_\_\_\_

Received By \_\_\_\_\_  
Check Number \_\_\_\_\_ Cash \_\_\_\_\_