

Cathedral of Saint Joseph

140 Farmington Avenue, Hartford, CT 06105

Phone: 860-289-8431

2018-2019 Religious Education Program Registration

Family Name: _____
(as registered with Parish)

Home address: _____
(street, town, state, zip)

Home Phone: _____ Family e-mail: _____

Mother's Name: _____ Father's Name: _____

Cell Phone #: _____ Cell Phone #: _____

Children Live with: _____ Mother _____ Father _____ Both _____ Other (please list below)

Name: _____ Relationship: _____

Address: _____ Phone: _____

Emergency Contact: _____
(name) (phone) (Relationship)

Child Name:	Age:	Birth Date:	Baptized	First Communion	Grade Level
_____	_____	_____	Yes / No	Yes / No	
_____	_____	_____	Yes / No	Yes / No	
_____	_____	_____	Yes / No	Yes / No	
_____	_____	_____	Yes / No	Yes / No	
_____	_____	_____	Yes / No	Yes / No	

**THIS CONFIDENTIAL INFORMATION WILL BE LIMITED TO:
RELIGIOUS EDUCATION ADMINISTRATORS, TEACHERS, AND CLASSROOM ASSISTANTS.**