

St. Catherine of Siena Catholic Church

1310 Bayswater Avenue, Burlingame, California 94010-4313
 650-344-6884 www.stcsiena.org stcatym@yahoo.com

Religious Education Registration for 2011-2012 and Parish Registration

Please complete this form and return with a **check to St. Catherine Church** in the amount of
\$75 for one child. **\$100** for 2 or more children. **\$125** for each out of parish child.
 New students **must** include a copy of their **Baptism Certificate**.

Family Last Name _____

Address _____ Apt. No. _____ City _____ Zip _____

Home Phone _____ Mother's Emergency Phone _____ Mother's E-Mail _____

Father's Emergency Phone _____ Father's E-Mail _____

	Last Name	First Name	Gender	Birthdate	Religion	Baptism Yes or No	1 st Communion Yes or No	Confirmed Yes or No	Occupation
Father									
Mother	Maiden:								

	Last Name	First Name	Gender	Birthdate	Religion	Baptism Date/Church	1 st Communion Date/Church	School	Grade
Child(ren) enrolling in R. E. (CCD)									
Other Dependents									

Please check All that apply

- 2 parents at home
- Mother Deceased
- Father Deceased
- Divorced/Separated
- Mom remarried
- Child(ren) with Mom
- Dad remarried
- Child(ren) with Dad
- Child(ren) with Adult other than parent

Language(s) spoken at home:

Please volunteer!

- Catechist or co-catechist
- Classroom Aide
- Music (during Opening Prayer)
- Supervision at Dismissal until 5:15
- RE Advisory Group
- Service & Justice Advisory Group
- Office, Clerical &/or Computer Help
- Help with parties
- Other _____

<p>____ We have been registered parishioner(s) since _____.</p> <p>____ We are registering for the first time.</p> <p>____ We use Sunday collection envelopes. Env. # _____.</p> <p>____ Please send Sunday collection envelopes.</p> <p>____ We are members of another parish, _____</p>	<p>Check enclosed: _____</p> <p>Note re. payment attached: _____</p> <p>Parents' Signatures</p> <p>_____</p> <p>_____</p> <p>Date: _____</p>
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