

Religious Education
Registration form for 2017-2018

Blessed Sacrament Catholic Church
 5 St. Teresa Drive, Charleston, SC 29407

OFFICE USE
LAST NAME:

Parents or Guardians (living in the home)	Home Phone
EMAIL ADDRESS	
Complete Mailing Address with zip code	Cell Phone
Father's Full Name (as it appears on Baptismal certificate)	Religion
Mother's Full Name (as it appears on Baptismal certificate)	Religion
We are Registered members of <input type="checkbox"/> Blessed Sacrament Catholic Church or <input type="checkbox"/> _____ Parish (please check one)	

Registration Fees:

First Child ... \$50	Two children ... \$100	Maximum Family Fee	\$125
First Communion Preparation Fee (paid only once - year child will receive)			\$20
Confirmation Preparation Fee (paid only once - year child will receive)			\$20

Checks should be made payable to **Blessed Sacrament Catholic Church**
 Please write name of child(ren) on the check

Total Due: _____

Student Information		Weekday School Information		* <input checked="" type="checkbox"/> sacraments child has ALREADY received.				OFFICE USE
Child's Name (Please Print Clearly)	Date of Birth	School Name	Grade	*Baptism	*Reconciliation	*Eucharist	*Confirmation	Level

Please List the complete name and location of the church where each child was baptized.
 Example: Our Lady of the Hills Newport News, VA

Child's Name	Name Of Church	Location of Church

Does your child have any learning or physical challenge of which we should be aware - or food allergy?
 Please speak with Deacon James or Tina Moore, if further explanation is needed. Thank you

Contact E-mail - tmoore@scbss.org