

# Catechesis of the Good Shepherd at the Holy Redeemer Parish Registration Form

Family Surname: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_

Mom's Name \_\_\_\_\_

Dad's Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Cell #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone or Cell #: \_\_\_\_\_

Allergies: \_\_\_\_\_

Special Needs: \_\_\_\_\_

*Please make your cheque payable to Holy Redeemer Parish. Deliver to the parish during office hours.*

## **Accounting Use:**

Date Received: \_\_\_\_\_

Cheque #: \_\_\_\_\_ or Cash \_\_\_\_\_

Amount paid: \$ \_\_\_\_\_

Date of Parent Contact: \_\_\_\_\_

Child's Age at Registration: \_\_\_\_\_