

**Registration Form for Sacred Heart Religious Education Program  
Grades K through 12**

Student Name: \_\_\_\_\_  
Grade: \_\_\_\_\_ School: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Parent Information**

Father: _____	Mother: _____
Home Phone: _____	Home Phone: _____
Cell Phone: _____	Cell Phone: _____
Work Phone: _____	Work Phone: _____
Email: _____	Email: _____

If divorced, which parent has custody? \_\_\_\_\_  
Stepparent (if applicable): \_\_\_\_\_

**Child/Teen Information**

Birth date: \_\_\_\_\_ Male/Female \_\_\_\_\_ Baptism? \_\_\_\_\_  
Reconciliation? \_\_\_\_\_ First Communion? \_\_\_\_\_ Confirmation? \_\_\_\_\_

**Volunteer Information**

*We ask that parents be involved in the religious education program in some way.*

Name of Parent/s Volunteering: \_\_\_\_\_  
\_\_\_\_\_ Teacher \_\_\_\_\_ Grade  
\_\_\_\_\_ Teacher Aide \_\_\_\_\_ Grade  
\_\_\_\_\_ Substitute Teacher/Aide \_\_\_\_\_ Grades  
\_\_\_\_\_ Hall monitor  
\_\_\_\_\_ Open and lock school and set up audio-visual equipment  
\_\_\_\_\_ Clerical help on Wednesday evenings  
\_\_\_\_\_ Stuffing envelopes/clerical help during daytime or evening hours  
\_\_\_\_\_ Other \_\_\_\_\_

Registration Fee: 1 Child \$25; 2 Children \$45; 3 or more \$55; please make checks payable to **Sacred Heart Church**. Mail or bring by the Sacred Heart Business Office, Attn: Barbara Rohmer, 714 N. Main St., Muenster, TX 76252 If you are a teacher, aide, or helper, deduct \$20 from registration fee. **Please send it forms now! Opening Mass is Wednesday, August 25, at 7 pm.**

Office use only: Paid: \_\_\_\_\_ Check# \_\_\_\_\_ Cash \_\_\_\_\_ (See back side)