

# **Religious Education Programs** **1<sup>st</sup> - through Grade 8, Youth Ministry, Confirmation** **& Parish Registration – Sacred Heart Church, Bloomfield CT**

Father/Guardian \_\_\_\_\_ Mother/Guardian \_\_\_\_\_ Mother's Maiden Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency Contact and Relationship \_\_\_\_\_ Emergency Phone \_\_\_\_\_

Child Name	Date of Birth	Age	Grade	Baptized? Yes / No	Reconciliation? Yes / No	Communion ? Yes / No	In which programs is this child registering? K-8? Youth Ministry? Confirmation?

## **Photographs and the Sacred Heart Website - Permission**

Religious Education Programs begin in September and end in August or earlier. During the year, are several events during which photos may be taken, such as class pictures, Young People's Masses, First Communion.

*With your permission*, we would like to share these photos with our community by posting photographs on the Sacred Heart website. *No names* of children will be posted, only photographs and only with your permission.

\_\_\_\_\_ I ***give*** permission \_\_\_\_\_ I ***do not give*** permission  
 for my child's/children's photograph to be posted at [www.sacredheartbloomfieldct.com](http://www.sacredheartbloomfieldct.com) .

\_\_\_\_\_  
 Parent / Guardian Name

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

\*\*\* ***Please complete reverse side*** \*\*\*

## **Page 2 – 1st through Grade 8, Youth Ministry, Confirmation & Parish Registration**

**Religious Education Fees** – Fees cover books and other religious education materials. Fees are:  
\$20 for one child;      \$35 for two children;      \$50 for three or more children.

In cases of financial hardship, please contact the Religious Education Coordinator.

Office Use: Paid: Cash _____ Check # _____ Amount _____ Date _____
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***Is your family already registered in Sacred Heart Parish?***    \_\_\_ Yes      \_\_\_ No      \_\_\_ Not sure

If *No*, or *Not sure*, please complete the following.

1. Would you like to use envelopes for Church support? (People using envelopes receive a statement of financial donations for tax purposes.)  
\_\_\_ Yes                      \_\_\_ No

2. Is there something that the parish can help you with? For example, homebound family member, Confirmation preparation, marriage within the Catholic Church.

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3. Is there a ministry that you are interested in learning about or joining?

___ Parish Council	___ Human Concerns	___ Social activities
___ Eucharistic Minister	___ Lector	___ Greeter
___ Gardens	___ Lazarus (funeral assistance)	___ Finance
___ Buildings	___ Coffee hour	___ Good Samaritan (visiting homebound)

4. Please list other family members not listed on front page. All adult children must be registered under their own name.

Name (first, last)	Date of Birth	Baptized? Yes / No	Communion? Yes / No	Confirmed? Yes / No	Married? Yes / No

Signature \_\_\_\_\_

Date \_\_\_\_\_