

Saint Dennis Catholic Church

2017-2018 Religious Education Re-Registration Form

How many children are you registering? 1 2 3 4 5 6

Child Information

Child's Name _____

Child's Date of Birth ____/____/____

Last Grade Completed _____

Medical or other information we may need to know about the child (including food allergies)

Child's Name _____

Child's Child Information

Date of Birth ____/____/____

Last Grade Completed _____

Medical or other information we may need to know about the child (including food allergies)

Child Information

Child's Name _____

Child's Date of Birth ____/____/____

Last Grade Completed _____

Medical or other information we may need to know about the child (including food allergies)