

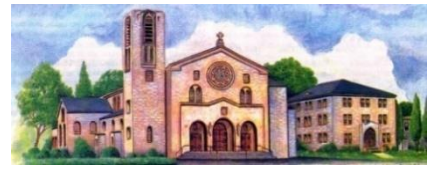
Holy Comforter – Saint Cyprian Roman Catholic Church

Reverend Monsignor Charles Pope, Pastor

Office of Religious Education
Shirley Austin, Minister of Religious Education

1357 East Capitol Street, SE, Washington, DC 20003

202-546-1885 ext. 26 ❖ mre@hscchurch.org ❖ www.hscchurch.org



Let the children come to me

2020-2021 RELIGIOUS EDUCATION REGISTRATION FORM

PLEASE PRINT INFORMATION CLEARLY

Student Information

check one: Male Female

Name: _____
First Middle Last

Date of Birth: _____ Name child is usually called: _____

Address: _____

Home Phone: _____ Language spoken at home: _____

Grade for 2020-2021 school year: _____ School Attending: _____

Child lives with: (check one) Both Parents Mother Only Father Only Other: _____

Has youth received Baptism? _____ If yes, Parish name and year: _____

Has youth received First Eucharist? _____ If yes, Parish name and year: _____

Has youth received Confirmation? _____ If yes, Parish name and year: _____

Please list siblings and ages: _____

Parent Information

Father's Name: _____ Religion: _____
First Last

Home Address: _____ Email: _____

Phone: (home) _____ (cell) _____ (work) _____

Has Father received Baptism? _____ First Eucharist? _____ Confirmation? _____

Mother's Name: _____ Religion: _____
First Last

Maiden Name: _____

Home Address: _____ Email: _____

Phone: (home) _____ (cell) _____ (work) _____

Has mother received Baptism? _____ First Eucharist? _____ Confirmation? _____

Emergency contact person (other than parents)

Name: _____ Relationship to child: _____

Best contact number(s): _____

Does your family regularly attend Holy Comforter-Saint Cyprian Church? Yes No

If no, name of Parish you attend _____

Is your family a registered member of Holy Comforter-Saint Cyprian? Yes No

If no, name of Parish you are registered _____

Does this child have any medical or learning disabilities or food allergies? Yes No

If yes, please explain _____

Number of children under 18 living in household not attending Religious Education classes: _____

Please check here if you are interested in volunteering in our Religious Education Programs:

Teaching Substitute Teacher Other _____

RELEASE AND CONSENT FORM FOR PHOTOGRAPHY (Minors 18 and under)

Please Check One:

I **DO** grant permission to Holy Comforter-St. Cyprian Church to use the photographs/videos and quotations of my son/daughter to assist in community awareness, educational efforts, related public relations purposed that may include brochures, posters, website and print media.

I **DO NOT** grant permission to Holy Comforter-St. Cyprian Church to use the photographs/videos and quotations of my son/daughter to assist in community awareness, educational efforts, related public relations purposed that may include brochures, posters, website and print media.



Please complete one form per child. Completed forms may be dropped off or mailed to the rectory office or email: mre@hscchurch.org