**Sacred Heart Catholic Church**

**Religious Education Enrollment Form 2024-2025**

**Kindergarten-12th Grade**

# **Student Information**

|  |  |  |
| --- | --- | --- |
| **Full Name:** | | **Date of Birth:** |
|  | |  |
| **Grade:** | **Any medical Needs / Issues?** | |
|  |  | |
| **School:** | | |
| BISD  LISD Other: | | |

# **Sacraments**

|  |  |  |  |
| --- | --- | --- | --- |
| **Sacrament** | **Received?** | **Date** | **Parish** |
| Baptism | Yes  No |  |  |
| Reconciliation | Yes  No |  |  |
| Holy Eucharist | Yes  No |  |  |
| Confirmation | Yes  No |  |  |

# **Best Way to Contact You**

|  |  |
| --- | --- |
| **Parent Name:** | **Email:** |
|  |  |
| **Mobile Phone:** | **Home Phone:** |
|  |  |
| **Address:** | **City, State, Zip code:** |
|  |  |
|  |  |
| **Parent Name:** | **Email:** |
|  |  |
| **Mobile Phone:** | **Home Phone:** |
|  |  |
| **Address:** | **City, State, Zip code:** |
|  |  |

# **Emergency Contact**

|  |  |
| --- | --- |
| **Name:** | **Phone Number:** |
|  |  |