**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:** |
|  |   |