

**St. Joseph Parish**  
**Religious Education Registration - 2007/2008**  
114 High St., Medford, MA 02155  
781-395-1784  
[Stjoereled@yahoo.com](mailto:Stjoereled@yahoo.com)

Family Last Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Mother's First and Maiden Name: \_\_\_\_\_

Telephone - Home: \_\_\_\_\_ Work: Mom \_\_\_\_\_ Dad \_\_\_\_\_

Cell: Mom \_\_\_\_\_ Dad \_\_\_\_\_

In case of Emergency Contact: \_\_\_\_\_

**\*\*Email:** \_\_\_\_\_ (to advise of any cancellations, upcoming meetings, etc.)

Parents Religion: Mom: \_\_\_\_\_ Dad: \_\_\_\_\_

**1<sup>st</sup> Child:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Sex:** \_\_\_\_\_ **Grade** (entering in September): \_\_\_\_\_ **School:** \_\_\_\_\_

**Sacraments:** Baptism: Date: \_\_\_\_\_ Place: \_\_\_\_\_ Catholic? \_\_\_\_\_

1<sup>st</sup> Eucharist: Date: \_\_\_\_\_ Place: \_\_\_\_\_

1<sup>st</sup> Penance: Date: \_\_\_\_\_ Place: \_\_\_\_\_

Special Needs: medical, learning/physical disabilities and ALLERGIES: \_\_\_\_\_

**2<sup>nd</sup> Child:** \_\_\_\_\_ **Birthdate:** \_\_\_\_\_

**Sex:** \_\_\_\_\_ **Grade**(entering in September): \_\_\_\_\_ **School:** \_\_\_\_\_

**Sacraments:** Baptism: Date: \_\_\_\_\_ Place: \_\_\_\_\_ Catholic? \_\_\_\_\_

1<sup>st</sup> Eucharist: Date: \_\_\_\_\_ Place: \_\_\_\_\_

1<sup>st</sup> Penance: Date: \_\_\_\_\_ Place: \_\_\_\_\_

Special Needs: medical, learning/physical disabilities and ALLERGIES: \_\_\_\_\_

**NOTE:** If your child was NOT baptized here at St. Joseph, please provide us with his/her baptism certificate upon registration.

**ALSO, PLEASE NOTE** – IF YOUR CHILD ATTENDED RELIGIOUS EDUCATION CLASSES ELSEWHERE, YOU MUST PROVIDE US WITH A LETTER FROM THE PARISH WITH THE DATES AND GRADES OF ATTENDANCE AND ANY SACRAMENTS RECEIVED.

**FAMILY REGISTRATION FEE DUE IS \$100.00 (REGISTER BY 6/30 AND PAY ONLY \$80.00) –**  
**GRADE 9 ADD \$15.00 FOR KAIROS -/- GRADE 10 ADD \$50.00 FOR RETREAT**  
**NO FEE FOR GRADE 1 CHILDREN.**  
**MAKE CHECKS PAYABLE TO ST. JOSEPH PARISH AND MAIL TO ABOVE ADDRESS.**