

**St. Richard Parish Religious Ed Program
GRADE NINE– Level I**

Student's name _____ Birthdate _____
Parent/Guardian father: _____ father cell: _____
Parent/Guardian mother: _____ mother cell: _____
Mother's Maiden Name _____
Home Address: _____ Home Number _____
City, state, zip code _____
Email: _____

Any Special instructions regarding the student, such as allergies or
Special education needs:

Baptismal Date: _____ Church/city: _____

I would love to VOLUNTEER my services as
TEACHER _____ **MONITOR** _____ **SUBSTITUTE** _____

Permission is needed in the event a photo is taken as your child engaged in a religious education class or parish activity/event.

____ YES a photo may be taken ____ NO photos may not be taken

AMOUNT DUE PER STUDENT: \$75.00

Please mail completed form with payment to:
St Richard Parish 90 Forest Street
Danvers, MA 01923
Attention: St. Richard Religious Ed

DEADLINE IS AUGUST 1ST

