

Only one form needed per family. Please fill out both sides.

# Mother Seton Parish

19951 Father Hurley Blvd • Germantown, MD 20874 • 301-444-3496



MOTHER SETON  
CATHOLIC CHURCH

## Summer Session 2018

## Session June 18 – June 29

**FAMILY LAST NAME** \_\_\_\_\_ **HOME PHONE** \_\_\_\_\_

**ADDRESS**  
 \_\_\_\_\_  
 Street \_\_\_\_\_ City/State \_\_\_\_\_ Zip Code \_\_\_\_\_

Are you registered members of Mother Seton Parish?  YES  NO If NO, would you like to register?  YES  NO

**FATHER'S FULL NAME** \_\_\_\_\_ Religion \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_ **Email** \_\_\_\_\_

If you are Catholic, please check the Catholic sacraments you have received: \_\_\_\_\_ Baptism \_\_\_\_\_ Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_ Marriage \_\_\_\_\_

**MOTHER'S FULL NAME** \_\_\_\_\_ RELIGION \_\_\_\_\_

Work phone \_\_\_\_\_ Cell phone \_\_\_\_\_ **Email** \_\_\_\_\_

If you are Catholic, please check the Catholic sacraments you have received: \_\_\_\_\_ Baptism \_\_\_\_\_ Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_ Marriage \_\_\_\_\_

STUDENT FULL NAME	D.O.B.	SCHOOL GRADE FALL 2018	MALE	FEMALE	Was student in religion class last year?	Is the Child Baptized	Has your child received First Communion
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes

Please circle the Sacrament you are requesting for your child this year: **Baptism** **First Communion** **Confirmation**

Does your child(ren) have any medical or learning disabilities or food allergies?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please complete Medical Form (on website).

**Please check here if you are interested in helping out in our Religious Education Program:**

Name \_\_\_\_\_ I could help as:

Catechist \_\_\_\_\_ Aide \_\_\_\_\_ Substitute \_\_\_\_\_ Office \_\_\_\_\_

### STUDENT PICK UP AUTHORIZATION

**Please note: Students will not be released to anyone not authorized by the legal parent or guardian.**

In the event that I am unable to pick up my child(ren) from Religious Education classes, the following people have my permission to do so:

1) Name \_\_\_\_\_ Phone Number \_\_\_\_\_

2) Name \_\_\_\_\_ Phone Number \_\_\_\_\_

### MEDICAL RELEASE AUTHORIZATION

In the event of an emergency, I authorize the staff of Mother Seton Parish and/or the nearest medical facility to administer immediate medical attention to my child(ren) if necessary and only if unable to contact me.

Parent/Legal Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

### REGISTRATION FEES

*(Please make checks payable to Mother Seton Parish-SOR)*

**One Student: \$400**  
**Two Students or more: \$475**

**\*\*Fees include books, supplies and field trip.**

#### OFFICE USE ONLY

Fee Paid \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_  
Received by: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Baptismal Certificate(s): \_\_\_\_\_ Yes \_\_\_\_\_ No

I am the legal parent or guardian of the child(ren) and I certify that the information contained on this form is correct:

Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_