

# HOLY SPIRIT CATHOLIC CHURCH

2025-2026

## Registration for Religious Education

Circle /Check One:

- **10:15 am Class** (Confirmation Class offered on Sundays at 10:15 am Only)
- **12:00 pm Class** (Spanish Language Only)

PLEASE PRINT CLEARLY

**FATHER:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle Cell Phone Home Phone

**Address:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street Ave/ St/ Rd Apt.# City / State ZIP Code

**Catholic:** Yes \_\_\_ No \_\_\_ **Email Address:** \_\_\_\_\_

**Registered at Holy Spirit?** Yes \_\_\_\_\_ No \_\_\_\_\_ (If not, where?) \_\_\_\_\_

**MOTHER:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First Middle MAIDEN Cell Phone Home Phone

**Address:** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Street Ave/ St/ Rd Apt.# City / State ZIP Code

**Catholic** (check or circle one): Yes \_\_\_ No \_\_\_ **Email Address:** \_\_\_\_\_

**Registered at Holy Spirit?** (check or circle one): Yes \_\_\_\_\_ No \_\_\_\_\_ (If not, where?) \_\_\_\_\_

**Child's Address (lives with):** (check or circle one): Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardians \_\_\_\_\_

Please send information in: ENGLISH \_\_\_\_\_ SPANISH \_\_\_\_\_

\*Confirmation Students ONLY: Can we take a photo of your child for a Prayer Chart: Yes \_\_\_\_\_ NO \_\_\_\_\_

<u>STUDENT'S NAME:</u>				<u>As of Sept. 1, 2025</u>	<u>REC'D Sacraments: HS Ch or ✓</u>					
LAST Name,	FIRST Name	<input type="checkbox"/> M	<input type="checkbox"/> F	DATE of BIRTH	School	/Grade	Bapt.	1 <sup>st</sup> Rec	1 <sup>st</sup> Comm.	Confirm.
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**Registered Parishioner's Fee:** \_\_\_\_\_ \$40.00 one child  
 \_\_\_\_\_ \$50.00 two children  
 \_\_\_\_\_ \$60.00 three or more

**NON-Parishioner's Fee:** \_\_\_\_\_ \$50.00 one child  
 \_\_\_\_\_ \$75.00 two children  
 \_\_\_\_\_ \$100.00 three or more

**DATE OF REGISTRATION:** \_\_\_\_\_ Cash \_\_\_\_\_ Check # \_\_\_\_\_