

## St. Anthony Mission -- St. Elizabeth Parish

### Student Registration for Religious Education - School Year 2025-2026

### Classes Begin August 17th! See Website for Schedule

All families must be registered members of the parish to enroll their children in Religious Education classes. If you have not yet registered in the parish, please complete a registration form and turn it in with these forms. Please attach payment and a copy of your children's Baptismal Certificate(s) if not already submitted. **For organizational purposes, please submit all these documents at the same time. Thank you.**

Parent Last Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street

City

State

Zip

Email (mom) \_\_\_\_\_ Cell number \_\_\_\_\_

Email (dad) \_\_\_\_\_ Cell number \_\_\_\_\_

Father's Name \_\_\_\_\_

Father's Religion \_\_\_\_\_

Mother's Name (with maiden) \_\_\_\_\_

Mother's Religion \_\_\_\_\_

1. As the parent(s) of this child, I realize that **I am primarily responsible for his/her religious education.**
2. As a parent, I will make sure that my child attends religious education classes each week.
3. As the parent of this child, I will encourage him/her to study, complete assignments, and put into practice the religious teachings and values being learned through religious education classes.
4. I will support the Religious Education Program by supporting the teachers in their efforts and by encouraging my child's cooperation and ensuring that my child's work and projects are timely completed.
5. I am aware that habitual tardiness and/or absence from class may delay my child's reception of the Sacraments of First Holy Communion and Confirmation.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**RE Fees: \$175 per child, \$225 for two, \$275 max per family.** If the fees are a hardship for your family, please contact us and we will make arrangements. All conversations of this nature are kept strictly confidential, and no child is left out of the program due to a financial hardship.

***There is an additional \$25 Sacrament fee for First Holy Communion and Confirmation students.***

Please return this form and payment to the Office of Religious Education  
Checks made payable to **Saint Anthony Church** or via Faith Direct

Terri Tolley, DRE: 9140 Saint Anthony Road, King George, VA [stadre@va.metrocast.net](mailto:stadre@va.metrocast.net) 540-847-9895

5/28/2024

**Student 1 Information****Grade for 2025-2026 \_\_\_\_\_**

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Sacraments Already Received (Please Circle) Baptism Penance Communion Confirmation

Date of Baptism \_\_\_\_\_ Church of Baptism, city and state \_\_\_\_\_

Has child received any previous Catholic Religious Education? Yes No

If yes, name of parish, city and state \_\_\_\_\_

Any allergies, medical or special needs? \_\_\_\_\_

**Student 2 Information****Grade for 2025-2026 \_\_\_\_\_**

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Sacraments Already Received (Please Circle) Baptism Penance Communion Confirmation

Date of Baptism \_\_\_\_\_ Church of Baptism, city and state \_\_\_\_\_

Has child received any previous Catholic Religious Education? Yes No

If yes, name of parish, city and state \_\_\_\_\_

Any allergies, medical or special needs? \_\_\_\_\_

**Student 3 Information****Grade for 2025-2026 \_\_\_\_\_**

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Sacraments Already Received (Please Circle) Baptism Penance Communion Confirmation

Date of Baptism \_\_\_\_\_ Church of Baptism, city and state \_\_\_\_\_

Has child received any previous Catholic Religious Education? Yes No

If yes, name of parish, city and state \_\_\_\_\_

Any allergies, medical or special needs? \_\_\_\_\_

**Student 4 Information****Grade for 2025-2026 \_\_\_\_\_**

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Sacraments Already Received (Please Circle) Baptism Penance Communion Confirmation

Date of Baptism \_\_\_\_\_ Church of Baptism, city and state \_\_\_\_\_

Has child received any previous Catholic Religious Education? Yes No

If yes, name of parish, city and state \_\_\_\_\_

Any allergies, medical or special needs? \_\_\_\_\_

**Are you interested in online Religious Education? Please note this is not available for Sacrament Years.**

\_\_\_\_ yes

\_\_\_\_ no