

For Office Use Only
Date Received

Program Assigned

CATECHETICAL CORRESPONDENCE COURSES

in the Diocese of Hamilton

Telephone: 905-528-7988 ext. 2339 www.hamiltondiocese.com

REGISTRATION FORM DATE: _____

| | First | | | | | | Last | | |
|---|---|------------|---------------|----------|-----------------------|---|------------|-----------------------|--|
| DATE OF BIRTH:_ | | | | | | | | | |
| | Mont | h | Day | | Yea | • | | | |
| PARENT CONTACT | T OR GUARDIA | N: | | | | | | | |
| ADDRESS: | | | | | | | | | |
| | Street | | C | City | | | | Postal Code | |
| PHONE: | ONE:I | | | | | | | | |
| SCHOOL PRESENT | LY ATTENDING | G: | | | | Grade: | in Sept | ember 20 | |
| Please include an | y comments r | egarding l | earning or sp | oecial n | eeds: | | | | |
| CHURCH where y | ou are registe | red: | Parish | | | | City | | |
| Parish Priest: | | | | | | | • | | |
| | | | | | | | | | |
| s your child bapt | ized? No Yes | | Parish | | | City | | | |
| What religious in: | struction has v | our child | | | | | • | | |
| wilat religious ili. | struction nas y | our cilliu | receiveu: | | | | | | |
| Has your child | d received? | First | Communion | No | Yes | Confirmation | on No | Yes | |
| ls your child p | oreparing to re | ceive a sa | acrament this | | l year? N rst Comm | | res Con | firmation | |
| • | • | | receive a sac | crament | t (First Re | | st Commun | ion, or Confirmation) | |
| Cost of Program: | \$60 per program (1 textbook & 1 set of lessons) \$150 for families registering 3 or more children \$20 (1 set of lessons only) | | | | | \$80 for families with 2 children sharing 1 textbook (2 sets of lessons provided) | | | |
| Send registration Please make che Mark your envel | que payable to | : Catholi | ic Diocesan A | ccount | | ng St. W., Hamilt | on, ON L8F | 107 | |
| | | | | | | | | | |

Catechist

CHILD'S NAME:

Date Program Sent