

**St. John the Evangelist Church RELIGIOUS EDUCATION REGISTRATION 2022-2023**  
**20 Church Street, Hopkinton, Ma 01748**

Today's date: \_\_\_\_\_

\*\*\*EMERGENCY CONTACT \_\_\_\_\_ Phone (\_\_\_\_\_) \_\_\_\_\_  
(Mandatory) Name to Ask For (cell phone number)

Student's Birth Name \_\_\_\_\_  
Last First

Date of Birth \_\_\_\_\_  Male  Female

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ E-Mail Address \_\_\_\_\_

School \_\_\_\_\_ Grade (in September) \_\_\_\_\_ My child has special needs \_\_\_\_\_  
(please describe on reverse side)

Father \_\_\_\_\_ Religion \_\_\_\_\_ Work/Cell Ph. (\_\_\_\_\_) \_\_\_\_\_

Mother \_\_\_\_\_ Religion \_\_\_\_\_ Work/Cell Ph. (\_\_\_\_\_) \_\_\_\_\_  
First Maiden name

Sibling(s) \_\_\_\_\_ Grade(s) \_\_\_\_\_

**BAPTISM: If your child was not baptized at St. John's, this registration form must be accompanied by a baptismal certificate or: \_\_\_My child was baptized at St. John's, Hopkinton, Ma.**

FIRST PENANCE: \_\_\_\_\_  
Year Church Town/City

FIRST COMMUNION: \_\_\_\_\_  
Year Church Town/City

Previous Parish of Instruction: \_\_\_\_\_  
Parish Name Town/City

**Tuition fee: To be determined, based upon what our program structure will look like this fall. We hope to offer home school and in person classes as we did this past year.**

**If you are sending your child for the first time, please fill out the registration form and get it back so we will have your child in our computer to allow us to send information as needed this summer.**

**Parents: We will need your help....**

**I am interested in: \_\_\_teaching a grade (two times a month)**  
**\_\_\_sharing a teaching position for Grade\_\_\_**