

**ASCENSION CATHOLIC COMMUNITY
RELIGIOUS EDUCATION REGISTRATION 2010-2011**

STUDENT INFORMATION

Student Last Name	Student First Name	Gender	School Attending '10-'11
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Student Place of Birth	Student Birth Date	School Grade ('10-'11)	RE Grade ('10-'11)
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If registering for the first time a copy of the students baptismal certificate is required as well as First Eucharist if celebrated. This applies to students baptized at Ascension.

Please Check your Choice of Session: Tuesday 4:00 - 5:15 PM _____ Wednesday 6:30 - 7:45 PM _____
****Classes Begin August 24th/25th**** (Grades K - 6) (Grades 1 - 8 & Confirmation Gr. 9+)

Please Indicate which sacrament(s) you hope to prepare for in '10-'11
 Reconciliation/First Holy Communion Confirmation

FAMILY INFORMATION

Ascension Parish Registration Number:

If you would like to be registered at Ascension, please let us know and we can provide you with our parish registration form.
 If not registered at Ascension, in what parish are you registered? _____

FATHER

MOTHER

First Name: _____ Last Name: _____	First Name: _____ Last Name: _____
Relationship to student: _____ Birth Father _____ Step-Father _____ Adopted _____ Legal Guardian _____ Grandparent	Relationship to student: _____ Birth Mother _____ Step-Mother _____ Adopted _____ Legal Guardian _____ Grandparent
Father's Marital Status: _____/_____/_____/_____/_____ Married / Separated / Divorced / Single / Widowed	Mother's Marital Status: _____/_____/_____/_____/_____ Married / Separated / Divorced / Single / Widowed
Father's Religion:	Mother's Religion:
Father's Home Phone:	Mother's Home Phone:
Father's Cell Phone:	Mother's Cell Phone:
Father's Work Phone:	Mother's Work Phone:
E-mail Address:	E-mail Address:

LEGAL GUARDIAN CONTACT INFORMATION

Legal Guardian(s) is/are (check applicable): Mother Father Grandparent Other

Address	City, State	Zip Code
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Home Phone # _____

Family E-mail Contact** _____

****Please note, we communicate with our families primarily through monthly e-mail newsletters.
 If you do not have an e-mail address, please let us know.****

WE ALWAYS NEED VOLUNTEERS! If you would like to help, please check below.

TEACHER _____ CLASSROOM VOLUNTEER _____ SUBSTITUTE _____ HALL MONITOR _____
 (Please complete other side)

EMERGENCY CONTACT *to be contacted in the event a parent/guardian cannot be reached

Emergency Contact Name _____ Home Phone _____

Cell Phone _____ Relationship to Student _____

Person(s) Authorized to pick up student _____

Does your child have any allergies/diagnosed learning/physical exceptionalities? _____

Primary Language Spoken at Home: _____

VIDEO/PHOTOGRAPHY CONSENT

Parents/guardians of participants are advised that photographs or videotape of participants may be used in publications, websites or other materials produced from time to time by the Religious Education Office of Ascension Catholic Church. (Participants would not be identified, however, without specific written consent).

I hereby expressly assign to the Diocese of Orlando and all its agents all the rights, title and interest in, and to all photos/videotape recordings made by such in which my child appears and/or his/her voice is used and in connection with the videotaping of any events. I hereby authorize the reproduction, sale, lease, copyright, exhibition, broadcast and/or any distribution of said photos/videotape without limitations for any purpose whatsoever, and I further waive all rights to any compensation for my child's appearance or participation in the photographs/videotape recordings.

 _____
Signature of Parent/Legal Guardian

Date Signed

PRINT Name of Parent/Legal Guardian

1 Child (\$80) _____	2 Children (\$100) _____	3 + Children (\$115) _____
<i>Classes Begin August 24th/25th, 2010.</i>		
Registration Fee Due July 24, 2009. Early Registration Discounts will be applied on April 13th & 14th, 2010 only.		
Late fee: \$10 per family for registration received after July 24, 2010. (Does not apply to new registrations.)		

Please return signed completed Registration form and payment to:

**Ascension Catholic Church
Attn: Religious Education Office
2950 N. Harbor City Blvd.
Melbourne, FL 32935**

(revised Spring 2010)

For office use only:						
	_____ Certificates	_____ Total Paid	_____ Cash	_____ Check #	_____ Check Date	_____ H P Dep