

**RE-REGISTRATION FORM**  
**SAINT VINCENT FERRER RELIGIOUS EDUCATION PROGRAM (2019-2020)**

\*Fill this form out **ONLY IF** your child attended Religious education classes at SVF during academic year Sept. 2018-May 2019.

\*\*If your child **DID NOT** attend Religious Education classes at SVF during academic year Sept. 2018-May 2019, you **MUST** fill out a New Registration Form.

Child's Full Name: \_\_\_\_\_ Present Age: \_\_\_\_\_

Child's Date Of Birth: \_\_\_\_\_ Grade Child Will Enter In Sept. 2019 \_\_\_\_\_

Address \_\_\_\_\_ Home Phone: \_\_\_\_\_

Send Mail To: \_\_\_\_\_

E-MailAddress: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Religion: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Religion: \_\_\_\_\_

Name Of School Attending In Sept. 2019: \_\_\_\_\_

Emergency Contact: If Neither Parent Can Be Reached, Who Should We Contact In Case Of An Emergency?

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

\*\*\*If your child received any Sacraments at SVF THIS YEAR (2019), please fill in the dates below:

Baptism: \_\_\_\_\_ Communion \_\_\_\_\_ Confirmation \_\_\_\_\_

\*\* Name of your Child's Religious Education Teacher at SVF during this past year (Sept. 2018-May 2019)

\_\_\_\_\_  
\_\_\_\_\_

Please List Any Special Needs Or Medical Conditions That We Should Be Aware Of:

\_\_\_\_\_

Date Fee Paid: (\$50.00 Per Family — *Payable By Money Order Only*) \_\_\_\_\_

Parents' Church (Tithe) Envelope #: \_\_\_\_\_

The required documents at the time of registration are:

1. Child's Original Baptismal Certificate
2. Birth Certificate
3. Transfer papers (if coming from another parish)

**Please Return This Completed Registration Form and Fee (Money Order Only) to the Rectory**

Parent or Guardian's Signature: \_\_\_\_\_

*Please Complete Form on Back*



**SAINT VINCENT FERRER**  
ROMAN CATHOLIC CHURCH

1603 Brooklyn Avenue  
Brooklyn, New York 11210  
Phone #718-859-9009 Fax #718-859-9032  
Email: info@saintvincentferrer.org

CONSENT TO PHOTOGRAPH, FILM OR VIDEOTAPE A MINOR

Name of Minor \_\_\_\_\_

Parish  Saint Vincent Ferrer Roman Catholic Church

I, \_\_\_\_\_, hereby consent to the participation in Interviews, the use of quotes, and the taking of photographs, movies or videotapes of my son/daughter as part of his/her participation in the  Religious Education/CCD/Parish/Diocesan Events parish program.

I understand and consent that these photographs, movies or videotapes may be placed on the internet. I also hereby release the parish and Diocese of Brooklyn from any claims, demands and liabilities whatsoever in connection with the above.

\_\_\_\_\_  
(Signature of Parent/Guardian)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Address of Parent/Guardian)