

## Religious Education Registration Form

Grades PreK-12 | 2025-2026 (FY 26)

### Family Information

#### Mother's Information

Full Name	
Maiden Name	
Religion	
Cell Phone	
Email	

#### Father's Information

Full Name	
Religion	
Cell Phone	
Email	

#### Child(ren) Information

Address (Primary Residence)	
City/State/ZIP	
Parish where registered	

#### Emergency Contact

Name	
Phone	
Relationship	

### Parental Consent

I consent to the use of photographs, videos or likeness of my child(ren) for parish related purposes only.

Examples: bulletins, parish directories, on-site posterboards or photo albums, parish website/social page, etc.

Circle one: YES / NO

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I understand that both my child(ren) and I are responsible for completing the Diocese of La Crosse Protect and Heal Student and Parent Training. If we do not complete the training, I understand that I must submit the appropriate opt-out form for my child(ren). For information regarding Protect and Heal training, please see <https://diolc.org/safe-environment/training/> or contact Pat Obernberger.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Program Fee

\$35.00 per family. Please include payment with registration.

Paid: YES / NO      Cash/Check # \_\_\_\_\_      Date: \_\_\_\_\_

### Student Information #1 (complete individual information for each child registering)

Student Name	
Date of Birth	
Place of Birth (city)	
Grade (2025–26)	
School Attending (or “Homeschool”)	
Sacraments Received (✓ all that apply)	<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
Baptism Location – Parish, City/State	
Date of Baptism (if known)	

If your child was not baptized at St. Mary Parish, Coon Valley or the Annunciation of the Blessed Virgin Mary Parish, Viroqua we request that you provide a photo copy of their Baptismal Certificate prior to receiving a sacrament.

### Class Registration (check all that apply)

- |   |   |
|---|---|
| <input type="checkbox"/> Catechesis of the Good Shepherd (Atrium I) – Ages 3–6  | <input type="checkbox"/> Decision Point (Grade 9)                                     |
| <input type="checkbox"/> Catechesis of the Good Shepherd (Atrium II) – Ages 6–9 | <input type="checkbox"/> Confirmation Preparation (Grades 10–12)                      |
| <input type="checkbox"/> Blessed: First Reconciliation (Grades 2–5)             | <input type="checkbox"/> Bible Study for Sunday Gospel Preparation (Grades 11+)       |
| <input type="checkbox"/> Blessed: First Communion (Grades 2–5)                  | <input type="checkbox"/> Little Rock Bible Study (6 & 3 session options) (Grades 11+) |
| <input type="checkbox"/> Family of Faith (K–9)                                  |   |
| <input type="checkbox"/> Encounter: Bible Timeline (Grades 6–8)                 |   |

### Medical / Special Needs Information:

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### Student Information #2

Student Name	
Date of Birth	
Place of Birth (city)	
Grade (2025–26)	
School Attending (or “Homeschool”)	
Sacraments Received (✓ all that apply)	<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
Baptism Location – Parish, City/State	
Date of Baptism (if known)	

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### Class Registration (check all that apply)

- |   |   |
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| <input type="checkbox"/> Catechesis of the Good Shepherd (Atrium I) – Ages 3–6  | <input type="checkbox"/> Decision Point (Grade 9)                                     |
| <input type="checkbox"/> Catechesis of the Good Shepherd (Atrium II) – Ages 6–9 | <input type="checkbox"/> Confirmation Preparation (Grades 10–12)                      |
| <input type="checkbox"/> Blessed: First Reconciliation (Grades 2–5)             | <input type="checkbox"/> Bible Study for Sunday Gospel Preparation (Grades 11+)       |
| <input type="checkbox"/> Blessed: First Communion (Grades 2–5)                  | <input type="checkbox"/> Little Rock Bible Study (6 & 3 session options) (Grades 11+) |
| <input type="checkbox"/> Family of Faith (K–9)                                  |   |
| <input type="checkbox"/> Encounter: Bible Timeline (Grades 6–8)                 |   |

### Medical / Special Needs Information

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☐ I am registering additional student(s). (Attach as many “Additional Student Registration Page(s)” as necessary).

## Additional Student Registration Page

(Complete one information section for each additional student being registered.)

**Parent/Guardian Name(s):** \_\_\_\_\_

### Student Information

Student Name	
Date of Birth	
Place of Birth (city)	
Grade (2025–26)	
School Attending (or “Homeschool”)	
Sacraments Received (✓ all that apply)	<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist <input type="checkbox"/> Confirmation
Baptism Location – Parish, City/State	
Date of Baptism (if known)	

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### Medical / Special Needs Information:

### Student Information

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Place of Birth (city)	
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### Medical / Special Needs Information