

**Christ the King and St. Anthony Parishes, West Warwick  
Faith Formation Registration 2023-2024**

Family Name \_\_\_\_\_ Phone \_\_\_\_\_ Primary E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_ Maiden Name \_\_\_\_\_

Second Address (if applicable) \_\_\_\_\_

*\*\*In Case of Emergency and you are unable to be reached, please indicate the person and phone number to be contacted. \*\**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

▶ *Please notify the parish office (401-821-8342) of any concerns regarding custody or persons to whom your child should not be released.*

#1. Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade (September) \_\_\_\_\_

Name of school your child will be attending in September: \_\_\_\_\_

Any allergies, medical conditions, behavior concerns, or learning needs that we need to be aware of? \_\_\_\_\_

#2. Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade (September) \_\_\_\_\_

Name of school your child will be attending in September: \_\_\_\_\_

Any allergies, medical conditions, behavior concerns, or learning needs that we need to be aware of? \_\_\_\_\_

#3. Student Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade (September) \_\_\_\_\_

Name of school your child will be attending in September: \_\_\_\_\_

Any allergies, medical conditions, behavior concerns, or learning needs that we need to be aware of? \_\_\_\_\_

**NEW REGISTRATIONS – Please attach a copy of BAPTISM AND FIRST COMMUNION (if applicable) Certificates.**

**PLEASE NOTE THAT FIRST COMMUNION & CONFIRMATION ARE TWO YEAR PROGRAMS. STUDENTS ENTERING INTO THE CONFIRMATION PROGRAM MUST HAVE BEEN IN CATHOLIC SCHOOL OR ATTENDED RELIGIOUS EDUCATION ON A REGULAR BASIS.**

▶ *Unless otherwise indicated by parent/guardian on this form, my child/children have permission to be photographed or videotaped by the Faith Formation program of Christ the King and St. Anthony's Church for the purpose of parish newsletters, bulletins, and/or parish affiliated media.*

Permission is granted for my child/children to be photographed and/or videotaped: YES \_\_\_\_\_ NO \_\_\_\_\_

PARENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Please call the parish office (St. Anthony 401-821- 8342 or Christ the King 401-821-9228)  
if you have any questions or require additional information.  
There is NO REGISTRATION FEE for families that participate in the parish budget program.**