## St. Mary's Parish School of Religion (SOR) Registration Please Print

Mailing Name (Exampl	e: Mr. and M	Irs. John Smith)			
Child's Address			Telephone		Unlisted?
			Email:		
Father (full name of biological father)	First	Full Middle Name	Last		Catholic?
Mother (full name of biological mother)	) First	Full Middle Name	Maiden Name	Last	Catholic?
Marital Status of Parent	s: Married	Separated	Divorce	ed	Widowed
Second Mailing Name a	and Address f	or Parent not living	at the Child's Addr	ess <del> (If A</del> p	oplicable) ——
			Telepho	ne 	
Child's Full Legal l (Full, Middle, Las			ate and tate of Birth		arch of Baptism and and State of Baptism
Note: Your family mus not receiving contribution Religious Education Of	on envelopes,	you may not be reg	istered. Registration	on forms a	re available through the
419-238-3979.	nee at the th	ne of registration.	Other wise, piease	Contact	ne ransii Office at
If your child was not ba copy of the record to St					m to ask them to send a
Registration Fee Due	Pa	nid by check#	Amount Pa	iid	Cash