



ST. ELIZABETH ANN SETON CATHOLIC CHURCH

PO BOX 648 QUINTON, VA 23141

RELIGIOUS ED PHONE: 804-932-3388

Email: reled@seascatholicchurch.org

2025-2026 RELIGIOUS EDUCATION REGISTRATION FORM

Last Name: _____ First Name of Adults in Family: _____

Address: _____ Email address: _____

Cell Phone: _____ Alternate Phone: _____

CHILD'S FIRST & LAST NAME	Gender	Formation Last Year?	Grade 2025-26	Allergies & Medical Info	Sacraments requested for 2025-26	Check Sacraments RECEIVED		
						Baptism	First Eucharist	Confirmation
	M / F	Yes / NO						
	M / F	Yes / NO						
	M / F	Yes / NO						
	M / F	Yes / NO						
	M / F	Yes / NO						
	M / F	Yes / NO						

Voluntary donations to defray program costs are appreciated. Suggested donation is \$20.00 per child, or \$50.00 max per family. Checks can be made payable to SEAS with "Religious Education" in the memo.

REGISTRATION FORM IS NOT COMPLETE WITHOUT INFORMATION ON REVERSE

EMERGENCY CONTACT INFORMATION

(if parent/guardian is unavailable)

Name: _____

Relationship: _____

Phone Number: _____ Alternate Phone: _____

Who is authorized to pick-up child(ren)? _____

PHOTO RELEASE FORM

I give permission for photographs of my children listed above to be published on the website/social media sites of St. Elizabeth Ann Seton Catholic Church. I understand that these photos can be viewed by anyone in the world but no identifying information will be displayed. I also give permission for photographs to be used in newspaper articles without identifying information. I understand that in the event that the names are necessary I will be requested to provide a separate release form for that particular occasion. I also give permission for my photos to be placed in promotion videos via the internet:

YES

NO

Parent/Guardian Signature: _____

ANY ADDITIONAL PERTINENT INFO ABOUT YOUR CHILD(REN)_____
