St. Clare/St. Vincent De Paul

4 St. Clare Way
Westerly, RI 02891
Rectory: 401-348-8765

CCD Registration Form

Registration fee is $35/$25 for two or more

2021/2022

PLEASE PRINT CLEARLY ALL INFORMATION **St. Clare _____ St. Vincent De Paul ____**
(please check which parish registered)

Name _____Date of Birth _____
First Middle Last Month Day Year

Address _____
Street City State Zip

Email _____

Grade Entering in fall _____

We will be sending important text announcements by Flock Notes to your cell phone. Please provide both your landline if available and the preferred cell phone numbers.

Family Information:

Father's Full Name _____ e-mail _____

Phone _____/_____/_____
Home work cell

Mother's Name _____ **Maiden Name** _____

Phone _____/_____/_____
Home work cell

Email _____

Emergency Information: (**May not be parents**)

Name_____Relationship_____
First Last

Phone_____/_____
Home cell

Allergies:_____

Baptismal Record: Please include an **original** of your child's Baptism certificate with this form. If Baptism was at St. Clare, please provide a date. We will return the original certificate to you.

Baptism - Date _____ Church_____
Communion - Date _____ Church _____
Place of Birth - _____