ST. FRANCIS XAVIER CHAPEL, JCC

Religious Education Registration Form
2026 ~ 2027

222 S. Hewitt Street, Los A20ngeles, CA 90012
(213) 626-2279 | info@sfxcjcc.org

Early Bird Registrations Due by August 9, 2026

Religious Education classes (Sunday School) designed for children ages 3 to 17 years are held on Sundays at 8:45 a.m., beginning **September 20, 2026** For those children receiving the Sacraments of Reconciliation, First Communion or Confirmation, please attach a copy of your child's baptismal certificate (unless they were baptized here at St. Francis Xavier). Please return this completed form, applicable certificates, and appropriate fees to the Rectory Office or drop it in the collection basket.

FAMILY LAST NAME _____

Street: _____ City/State/Zip _____

Telephone: _____ Email: _____

Father's Name: _____ Religion: _____

Cell Phone:_____ Email: _____

Mother's Name: _____ Religion: _____

Mother's Maiden Name: _____

Cell Phone:_____ Email: _____

Emergency Contact Name: _____ Telephone: _____

Children's Name	**DOB**	**Grade**

Registration fees, to cover the cost of materials & insurance for the 2026 ~ 2027 session are as follows:

One Student $ 75.00 Two Students $115.00 Three Students $155.00
Confirmation Registration: $110.00 per youth, per year, PLUS Retreat Fee

$10.00 discount per child for Early Bird Registration prior to by August 9, 2026

OFFICE USE ONLY:

Date Paid: _____ Amount Paid: _____ Check No.: _____

NEW STUDENT REGISTRATION

PLEASE PRINT

Grade Level _____ RE School Year _____

STUDENT INFORMATION

Full Name _____

Address _____

City/Zip _____ Phone _____

Birth Date _____ Birth Place _____

Public/Private School Attending _____

SACRAMENTAL INFORMATION

Baptism* _____
Date Church Address City

Reconciliation _____
Date Church Address City

1st Eucharist _____
Date Church Address City

Confirmation _____
Date Church Address City

***If not baptized at St. St. Francis Xavier, a baptismal certificate must be presented to complete registration**

MEDICAL/SPECIAL NEEDS INFORMATION

Does your child have any major physical disabilities or health problems? Yes / No

If yes, please explain: _____

RELIGIOUS EDUCATION HISTORY

_____ **FROM** _____ **TO** _____
(Catholic School or Religious Ed program)

Father's Name _____
First Middle Last

Religion _____ Phone _____ Email _____

Occupation _____ Work Phone _____

Mother's Name _____
First Middle Last (Maiden)

Religion _____ Phone _____ Email _____

Occupation _____ Work Phone _____

Child lives with: ☐ Both parents ☐ Father ☐ Mother ☐ Other _____

If parents are separated or divorced, does the other parent have legal access to the child? Yes / No

Languages spoken at home: _____

St. Francis Xavier Chapel Parishioner: ☐ Yes How long? _____

☐ No, registered at _____

Application completed by: _____ _____
Date