



Saint George Church

Office of Religious Education

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Religious Education Classes Registration Form 2025-2026

Please write in capital letters

Child's Name: _____ DOB _____

Address: _____ Grade _____

City: _____ State: _____ Zip _____

Cell Phone: _____

School Child Attends: _____ Grade: _____

Date of Baptism Church & City _____

Please provide a Baptism certificate with this registration.

Father Religion: _____

Father's name _____ Email _____

Mother Religion: _____

Mother's Maiden Name _____ Email _____