

ST. THERESE RELIGIOUS ED. REGISTRATION FORM

GRADE 7
(2017-2018)

Name _____
(Last) (First)

Child's Birthdate _____ Child's School _____ Child's Gender: M F

Father's Name _____ Mother's Name _____

(F) Cell# _____ (M) Cell# _____

Address _____
(Street) (Town) (Zip)

Home Phone# _____ Calling Post # _____
(For Snow/Emergency Class Cancellation)

Email _____ Email _____
(For Student Related Notifications) (For Parish Related Notifications)

Any information (special health or learning needs) which might be helpful to the teacher:

Please check the session you wish for your child to attend.
(Session choice not guaranteed until verified by Religious Ed. staff person)

TUESDAY EVENING
(7:30 p.m. - 8:45 p.m.)

SUNDAY SESSION
(10:45 a.m. - 12:00 p.m.)

NEW REGISTRATIONS ONLY: Please complete if your child has received sacraments.

Date of BAPTISM _____ Place _____
Date of 1st RECONCILIATION _____ Place _____
Date of 1st EUCHARIST _____ Place _____

Pre-requisite for enrolling in any Religious Education Program is registration of the family as active worshipping members of the St. Therese Parish Community.

FEE for REGISTERED families: \$100.00 one child, \$180.00 two children, \$240.00 family max.

[AFTER MAY 15th, ALL PREVIOUSLY REGISTERED CHILDREN WILL BE CHARGED A \$15.00 LATE FEE.]

_____ Paid Cash

_____ Paid Check (Please make payable to: St. Therese)

Date _____