

ST. CHRISTOPHER RELIGIOUS EDUCATION PROGRAM
NEW REGISTRATION 2017-2018

DATE _____ FAMILY PARISH # _____

FAMILY LAST NAME _____ ETHNICITY: _____

ADDRESS _____

CITY _____ ZIP CODE _____

EMAIL ADDRESSES **REQUIRED**

(1) _____

HOME PHONE _____ CELL PHONE _____

EMERGENCY CONTACT _____ RELATIONSHIP: _____

PHONE _____

FATHER'S NAME _____ FATHER'S RELIGION _____

MOTHER'S NAME _____ MOTHER'S RELIGION _____
(Include Maiden Name)

CHILD'S NAME _____ DATE OF BIRTH _____
SCHOOL _____ GRADE ENTERING IN SEPTEMBER _____

CHILD'S NAME _____ DATE OF BIRTH _____
SCHOOL _____ GRADE ENTERING IN SEPTEMBER _____

CHILD'S NAME _____ DATE OF BIRTH _____
SCHOOL _____ GRADE ENTERING IN SEPTEMBER _____

CHILD'S NAME _____ DATE OF BIRTH _____
SCHOOL _____ GRADE ENTERING IN SEPTEMBER _____

CHILD(REN) LIVE WITH: Mother _____ Father _____ Both Parents _____

Is there anyone who is NOT allowed to pick up your child(ren)? If yes, please list name(s):

Are there any special accommodations or needs that your child requires to be successful in the classroom? Yes _____ No _____

IF YES PLEASE EXPLAIN: _____

For emergency purposes does your child take any medication? Yes_____ No_____

If Yes...please explain

SACRAMENT INFORMATION

(If your child is a new Student NOT Baptized at St. Christopher, a Baptism Certificate is required)

CHILD: _____

DATE OF BAPTISM _____ **CHURCH OF BAPTISM** _____

ADDRESS OF CHURCH _____

DATE OF RECONCILIATION _____ **CHURCH** _____

DATE OF FIRST COMMUNION _____ **CHURCH** _____

DATE OF CONFIRMATION _____ **CHURCH** _____

CHILD: _____

DATE OF BAPTISM _____ **CHURCH OF BAPTISM** _____

ADDRESS OF CHURCH _____

DATE OF RECONCILIATION _____ **CHURCH** _____

DATE OF FIRST COMMUNION _____ **CHURCH** _____

DATE OF CONFIRMATION _____ **CHURCH** _____

CHILD: _____

DATE OF BAPTISM _____ **CHURCH OF BAPTISM** _____

ADDRESS OF CHURCH _____

DATE OF RECONCILIATION _____ **CHURCH** _____

DATE OF FIRST COMMUNION _____ **CHURCH** _____

DATE OF CONFIRMATION _____ **CHURCH** _____

CHILD: _____

DATE OF BAPTISM _____ **CHURCH OF BAPTISM** _____

ADDRESS OF CHURCH _____

DATE OF RECONCILIATION _____ **CHURCH** _____

DATE OF FIRST COMMUNION _____ **CHURCH** _____

DATE OF CONFIRMATION _____ **CHURCH** _____

***WAS YOUR CHILD IN A CATHOLIC ELEMENTARY SCHOOL OR A PARISH RELIGIOUS EDUCATION PROGRAM PRIOR TO THIS YEAR? YES___NO___**

SCHOOL _____ **RE** _____

***WE WILL NEED VERIFICATION FROM YOUR PREVIOUS DRE OR PRINCIPAL REGARDING ATTENDANCE**

Child Information Form 2017-2018

Child's Name: _____ **Grade:** _____

Tell us a little about your child:

Does your child have any physical challenges? If yes, please explain:

Does your child have any learning challenges? If yes, please explain:

Food Allergies? _____

Parents/Guardians....can we ask you to consider helping us on Tuesdays...

I would like to help as a catechist a sub an aide hall monitor office help

Other? _____

Parent/Gaurdian name: _____

Email & Phone number: _____

Thank You, Ms. Smierciak and Mrs. Baker

St. Christopher Religious Education Financial Agreement 2017-2018

MUST BE FILLED IN....ST. CHRISTOPHER CHURCH ENVELOPE # _____

We are not parishioners of St. Christopher. We belong to
_____ church.

Family Name _____
Children Name grade in September

Tuition

One child \$ 270 Two children \$ \$385 Three or more children \$490
Reconciliation/Communion fee \$50 Confirmation fee \$50

Total \$ _____
Paid \$ _____ date _____ check # _____ cash _____

All tuition, book fees and sacrament fees need to be paid by March 1, 2018 in order to be eligible to receive a Registration packet for 2018-2019. REGISTRATION WILL BE HELD MARCH AND APRIL 2018.

“I understand tuition/sacrament fees need to be paid in full by March 1, 2018 before we will be eligible to register for 2018-2019.”

Parent/Guardian Signature

_____ date _____

New Registration 2017-2018
Check off list

_____ **Family ID Number**

_____ **Registration Papers**

_____ **Financial Agreement**

_____ **Child Information Form**

_____ **Honeywell Form**

_____ **Baptismal Certificate**