

Most Precious Blood Parish

Religious Education Registration 2011-12

_____New To Parish

Children's Last Name: Address: Town, Zip: Phone:	E-Mail Address: (to be used for reminders)
Father's Full Name:	Other Parent's Address: (if different)
Mother's Full Name: (including maiden name)	:
Address mail to: Mr. & Mrs ____ Mr.____ Mrs.____ Ms.____ Both____ Other_____	

Please give us any information that will help insure a good year for your child, such as learning disabilities, food allergies, special needs, etc. This information will be kept in confidence.

Child's Name First and Middle	Nickname	Date of Birth	Gr. in 11-12	School attending in September

____ Yes, I am interested in joining the Faith Formation team as a Catechist for grade_____.

I give permission for the child(ren) registered above to participate in Faith Formation through Most Precious Blood Parish.

Signature _____ **Printed Name** _____ **Date** _____

Office Use Only: Baptismal Cert. _____ Amount Due – Registration _____ Amount Due – Special Fees _____ Amount Paid – Registration _____ Amount Paid – Special Fees _____ Balance Due _____ Check # _____ Date Received _____
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GRADES 1-5
Please note: (Please indicate 1st and 2nd choices)
Monday, 3:15-4:15 Grade 2 _____
Tuesday, 3:15-4:15 Grades 1,3,4,5 _____
Tuesday, 4:30-5:30 Grades 1, 3,4, 5 _____
Fee Information: The fee is \$125 per child for the first two children; \$50 for each additional child in the program. Sacramental Years: Grade 2 incurs an additional \$35 per child