

**Registration for St. Mary's Religious Education Program:
September 2020 - April 2021**

**Re-Registration of youth who already attend St. Mary's Religious
Education Program.**

Family Name _____ Phone (____) _____
 Email _____@_____

Children's Name(s): _____ Last level attended: _____ Class Level 2020-2021: _____
 _____ Last level attended: _____ Class Level 2020-2021: _____
 _____ Last level attended: _____ Class Level 2020-2021: _____

*New address? _____ *New phone? (____) _____ - _____
 *New email? _____@_____

Choice 1: Religious Education/Center-Based Program: Renew Registration

_____ Elementary: Kindergarten – Level 5
 _____ Junior High Ministry (6-8) _____ Senior High Ministry (9-12)

Choice 2: Religious Education/ Home-Based Program:

_____ New Member _____ Continuing Member

Registration fee enclosed:

Until June 22, 2020: _____ \$59 for 1 child _____ \$84 for 2 children _____ \$107 for 3 or more children
After June 22, 2020: \$79 for 1 child \$104 for 2 children \$127 for 3 or more children
Sacramental fees: _____ \$21 for Level 2 – 1st Reconciliation
 _____ \$21 for Level 3 – 1st Communion
 _____ \$30 for Level 6 & 7 – Confirmation

For First-Time Registration Only, please fill out the information below.

For Kindergarten, children must be eligible for Kindergarten in regular school for the coming year.

For Family Home Based Program (includes all ages), check here: _____ Home Based

If your child/youth is transferring from another program or Catholic School, please write the program, address and years attended on the bottom of this sheet.

The section below is for children who are new to the program; re-registration is at the top of this form.

| <i>St. Mary's Religious Education Registration</i> | |
|--|----------------------------|
| Student's Name _____ | Date of Birth _____ |
| Address _____ | Father's Name _____ |
| Phone _____ | Father's Religion _____ |
| School District _____ | Mother's Name _____ |
| | Mother's Maiden Name _____ |
| | Mother's Religion _____ |

| | DATE | CHURCH | ADDRESS |
|-----------------|------|--------|---------|
| BAPTIZED | | | |
| FIRST COMMUNION | | | |
| CONFIRMATION | | | |

Is there any information that will help us better serve your child in the learning process?

LIST IMPORTANT HEALTH INFORMATION _____
 (allergies, asthma, vision, hearing, etc.)