

## HOLY TRINITY 2018-2019 RELIGIOUS EDUCATION REGISTRATION

FAMILY NAME \_\_\_\_\_ HOME PARISH \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

\*\*\*EMAIL (for closings, updates, etc.) \_\_\_\_\_ Home Phone: \_\_\_\_\_

Father's name: \_\_\_\_\_ Religion: \_\_\_\_\_ Cell # \_\_\_\_\_

Mother's name \_\_\_\_\_ Religion: \_\_\_\_\_ Cell # \_\_\_\_\_

\*\*\*\*\* (maiden name for record keeping) \_\_\_\_\_

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**PLEASE LIST THE NAME & INFORMATION FOR EACH CHILD YOU REGISTER:**

NAME	SCHOOL & GRADE	DATE & PLACE of BIRTH
1. _____	_____	_____

Date and Place of: Baptism	Reconciliation	Eucharist
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NAME	SCHOOL & GRADE	DATE & PLACE of BIRTH
2. _____	_____	_____

Date and Place of: Baptism	Reconciliation	Eucharist
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\*\*\*if more than 2 children, please include information on back of this sheet. Thank you.

Have all children listed had previous Religious Education? Yes \_\_\_\_\_ No \_\_\_\_\_  
Where & When (if not at Holy Trinity)

Please check the following if it applies:

Learning Disability     Health Problems     Special Family Situations  
(please explain in detail on back of this form)

**CLASS TUITION:      \$50 PER STUDENT - MAXIMUM \$80 PER FAMILY**

**\*\*\*Register by August 26<sup>th</sup> and receive \$10 off these fees\*\*\***

**\*\*if for any reason the tuition cannot be paid at the time of registration, please see or call Susan Galley (366-0499), but get your paperwork in by August 26<sup>th</sup> to receive the discount.\*\***

**Please advise if tuition assistance is needed**

Cash: \$ \_\_\_\_\_

check # \_\_\_\_\_