Saint Elizabeth Parish

RELIGIOUS EDUCATION REGISTRATION FOR 2017-2018

(Updated June 2017**)**

Parent (s)_____

First Name *Last Name* *First Name* *Last Name*

Address:_____

Home Phone:_____ Work or Cell Phone:_____

Email address:_____

Which parent will be attending the session?_____ (Family Program only)

Class assignments are based on receipt of completed registration form and accompanying fee.

We are unable to accommodate any requests for class placement.

THE FAMILY PROGRAM: PRE-SCHOOL (3 YEARS OF AGE) THROUGH 6TH GRADE

First name	*Last name*	*Grade in Sept. 17*	*Indicate if child has special needs (diagnosis; Sp. Ed. classification; allergies) Information needs to be provided each year*

Please check off if you will need babysitting for a child under 3:_____

FAMILY FEE

The fee for religious ed. is **$300.00** for the year. *Registration will not be processed unless fee is enclosed. There is a $25.00 late registration fee for forms received after August 1st.*

Please indicate your first and second choice of session:

Monday	4:30 - 5:45	_____
Tuesday	4:30 - 5:45	_____
Tuesday	7:15 - 8:30	_____
Wednesday	4:30 - 5:45	_____
Home Study		_____

2-YEAR CONFIMATION PROGRAM, THURSDAY, 7:15-8:30 PM: GRADE 7 & 8

First name	*Last name*	*Grade in Sept. 17*	*Indicate Center or Home Study*

Indicate if child has special needs (diagnosis; Sp. Ed. classification; allergies). Information needs to be provided each year.

For Office Use:

Date rec:_____	Acct. #_____	Session:_____
Check #:_____	Parish manager:_____	Parent Track:_____
Amount:_____	Rel. Ed: _____	Sac. Candidate:_____