

# CHURCH OF ST. BRIDGET - RELIGIOUS EDUCATION PROGRAM

## *FAMILY REGISTRATION FORM*

FAMILY NAME: \_\_\_\_\_ Returning:\_\_\_ Not Returning:\_\_\_ Reason:\_\_\_\_\_

**Directions:** Please include the children in your family who will be participating in Levels K through 8 for the coming year in Religious Education.

STREET ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Family E-mail Address: \_\_\_\_\_

Student's Name:

Student's Public School & Town

Grade (2011-12):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Registered in Parish? Yes \_\_\_\_\_

No \_\_\_\_\_

**Special Needs**

For All Students:

Are there any special problems or circumstances about your child (Physical, Emotional, or Family) that will be helpful to the Religion Teacher in relating to your child?

Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes please explain: \_\_\_\_\_

Fee for 2010-11 is as follows:

\$100.00 1<sup>st</sup> child  
 10.00 each additional child

**PLEASE RETURN with PAYMENT on or before August 7, 2011**

*A late fee of \$20.00 will be charged if registration and payment is received after August 7, 2011*

<b><u>FOR OFFICE USE ONLY</u></b>	
Date Received: _____	
Amount: _____	Cash: _____
	Check #: _____