

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 (2013-14):

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 2013-14 is as follows:

\$125.00 1st child
10.00 each additional child

PLEASE RETURN with PAYMENT on or before Tuesday, August 13, 2013

A late fee of \$20.00 will be charged if registration and payment is received after August 13, 2013

FOR OFFICE USE ONLY

Date Received: _____

Amount: _____ Cash: _____

Check #: _____