

Saint Joseph Religious Education

Registration Form 2019-2020

FAMILY NAME: _____ - Maiden Name: _____

ADDRESS: _____

CITY: _____ ZIP: _____ PHONE: () _____ - _____

E-Mail Address: _____

*****INDIVIDUAL FAMILY INFORMATION*****

Father: _____ Work Tel# _____

Mother: _____ Work Tel # _____

Name of Child	Birthday	Grade in Sept ' _____	Bap	1st Com	Con	School Attending
_____	__/__/__	_____	Y/N	Y/N	Y/N	_____
_____	__/__/__	_____	Y/N	Y/N	Y/N	_____
_____	__/__/__	_____	Y/N	Y/N	Y/N	_____
_____	__/__/__	_____	Y/N	Y/N	Y/N	_____

SELECT A MASS PREFERENCE FOR YOUR FAMILY: SELECT ONLY ONE

(Grades Kindergarten through Grade 5)

() Saturday 4:00 pm () Sunday 8:00 am () Sunday 10:00 am

Does your child take any medication or have any physical or learning disabilities that we should be aware of? Please note below.

Deadline for registration August 15th

TUITION FEES:

\$40.00 one child	\$ _____
\$80.00 two children	\$ _____
\$100.00 three or more children	\$ _____
\$20.00 extra for 1st Reconciliation--Grade 2	\$ _____
\$30.00 extra for First Communion &-Confirmation Grade 3	\$ _____
\$30.00 extra for Confirmation Grades 9 & 8	\$ _____
\$10.00 Late Registration Fee after August 15th	\$ _____

Total Due \$ _____