

IMMACULATE CONCEPTION 2018-19

RELIGIOUS EDUCATION FORM

GRADES PRE-K—10

FAMILY INFORMATION

(PLEASE PRINT LAST NAME, FIRST NAME)

Father's Name: _____ Cell Phone: _____

Mother's Name: _____ Cell Phone: _____

Address/City/Zip Code:

Home Phone: _____ Email: _____

Is your family registered with the parish? (circle) Yes No Unknown

What Mass does your family usually attend? (circle) 4pm, 8:30am, 11:00am, fluxuates

Emergency Information: Please provide the name of someone who lives in the area, other than a parent, who your child(ren) can be released to:

Child #1 INFORMATION

Amount due: Grades K-8, \$25 Grades 9-10, \$35

First Name: _____ Last Name: _____

Grade Level: _____ Age: _____ Male Female Date of Birth ____/____/____

Will the above child be receiving a sacrament this year? Please circle

First Reconciliation (2nd Grade) First Eucharist (3rd Grade) Confirmation (10th Grade)

Child #2 INFORMATION

Amount due: Grades K-8, \$25 Grades 9-10, \$35

First Name: _____ Last Name: _____

Grade Level: _____ Age: _____ Male Female Date of Birth ____/____/____

Will the above child be receiving a sacrament this year? Please circle

First Reconciliation (2nd Grade) First Eucharist (3rd Grade) Confirmation (10th Grade)

Child #3 INFORMATION

Amount due: Grades K-8, \$25 Grades 9-10, \$35

First Name: _____ Last Name: _____

Grade Level: _____ Age: _____ Male Female Date of Birth ____/____/____

Will the above child be receiving a sacrament this year? Please circle

First Reconciliation (2nd Grade) First Eucharist (3rd Grade) Confirmation (10th Grade)

Child #4 INFORMATION

Amount due: Grades K-8, \$25 Grades 9-10, \$35

First Name: _____ Last Name: _____

Grade Level: _____ Age: _____ Male Female Date of Birth ____/____/____

Will the above child be receiving a sacrament this year? Please circle

First Reconciliation (2nd Grade) First Eucharist (3rd Grade) Confirmation (10th Grade)

Please list any comments or concerns regarding your child(ren) that might be beneficial for your child's teacher to be aware of:

Amount Due: Grades 1-8 \$25, Grades 9-10 \$35

Total amount due: _____

Please make checks payable to Immaculate Conception Church

Office Use Only

Amount Due: Grades 1-8 \$25, Grades 9-10 \$35

Amount Paid : _____

Date _____ Forms completed Payment received in full