

**Saint James Parish Religious Education Registration 2011—2012
New Student**

Family Name: _____ **Home Phone:** _____
 (please print)

Father's Name: _____ **Cell Phone:** _____

Mother's Name: _____ **Cell Phone:** _____
 (Maiden Name)

Home Address: _____ **Family e-mail:** _____
 _____ **Custodial Parent:** _____

Emergency Contact: _____ **Phone:** _____

Child: _____ **Date of Birth:** ___/___/___ **Entering Grade in Sept:** _____

Session: **Sunday** **Tuesday** **Home School** -\$20.00 additional fee

Please check sacraments received: Baptism Reconciliation Eucharist

If sacraments not received at Saint James, please provide copies of certificates.

Please indicate any modifications your child may need in the classroom on the reverse of this form. Please share information with us regarding allergies, or any special needs.

Registration fee: \$100 class fee plus \$20 book fee—total \$120 After June 1, 2011 add \$25 late fee—total \$145

Child: _____ **Date of Birth:** ___/___/___ **Entering Grade in Sept:** _____

Session: **Sunday** **Tuesday** **Home School**—\$20.00 additional fee

Please check sacraments received: Baptism Reconciliation Eucharist

If sacraments not received at Saint James, please provide copies of certificates.

Please indicate any modifications your child may need in the classroom on the reverse of this form. Please share information with us regarding allergies, or any special needs.

Registration fee: \$170 class fee plus \$40 book fee—total \$210 After June 1, 2011 add \$25 late fee—total \$235

Child: _____ **Date of Birth:** ___/___/___ **Entering Grade in Sept:** _____

Session: **Sunday** **Tuesday** **Home School**—\$20.00 additional fee

Please check sacraments received: Baptism Reconciliation Eucharist

If sacraments not received at Saint James, please provide copies of certificates.

Please indicate any modifications your child may need in the classroom on the reverse of this form. Please share information with us regarding allergies, or any special needs.

Registration fee: \$240 class fee plus \$60 book fee—total \$300 After June 1, 2011 add \$25 late fee—total \$320 Family maximum. Please add any additional children on another form.

I give permission for my child to take part in the Religious Education Program at Saint James the Apostle Parish. In the event of an emergency, I give permission to the catechist and/or parish staff to take my child to the hospital if they are unable to contact the parties designated above. I also understand my commitment to be the primary educator of my child through ensuring class assignments are completed and my participation in the life of the community by attending Mass with my child on Sunday and Holy Days of Obligations. **I also grant permission to Saint James to use: My child's name in News Releases, Video Taping and photographs in any publication used by or for Saint James Parish.**

Date: ___/___/___ **Signature Parent/Guardian:** _____
 (Office Use Only)

Check # _____ Amount: \$ _____ Date Received: ___/___/2011