



**St. Joseph's Parish  
2023-2024  
RELIGIOUS EDUCATION  
REGISTRATION FORM**



**Grades K – 6**

**New students to program need to submit:**

**Copy of Baptismal Certificate (Required)**

**Grades K – 4 meet on Sundays    Grades 5 & 6 meet on Wednesday nights 7 – 8pm**

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address \_\_\_\_\_

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Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address \_\_\_\_\_

Child/Children in care of    \_\_\_ Both Parents    \_\_\_ Mother    \_\_\_ Father    \_\_\_ Guardian

**STUDENT(S) INFORMATION:**

Name \_\_\_\_\_ Sex (M or F)    Date of Birth \_\_\_\_\_

Grade in Sept. \_\_\_\_\_ Grades K – 4, check appropriate session    \_\_\_ 9 am or    \_\_\_ 11 am

School    \_\_\_ LPES    \_\_\_ LPMS    Other \_\_\_\_\_

**Circle the sacraments your child received: Baptism, Penance, Communion**

\*\*\*\*\*

Name \_\_\_\_\_ Sex (M or F)    Date of Birth \_\_\_\_\_

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**Circle the sacraments your child received: Baptism, Penance, Communion**

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Learning Concerns/Needs: Please explain briefly.

Allergies important to know:

**Media Consent Form:**

Would you allow your child/ren's photos to be shown in the parish bulletin, parish website, or the newspaper?

\_\_\_\_ Yes, I would allow. \_\_\_\_\_  
*Parent Signature*

\_\_\_\_ No, I would not allow. \_\_\_\_\_  
*Parent Signature*

If you would like to be involved in our program, helping in some capacity, please sign below. The gifts and talents of folks are always appreciated.

\_\_\_\_\_  
*Signature*

<b>FEES:</b>	<b>1 Child</b>	<b>\$ 75.00</b>
	<b>2 Children</b>	<b>\$100.00</b>
	<b>3 or more Children</b>	<b>\$130.00</b>
	<b>First Holy Communion</b>	<b>\$ 30.00</b>
	<b>Sacramental Fee</b>	
	<b>Kindergarten Only</b>	<b>\$ 30.00</b>

**Due by Aug. 1st!**

**A LATE FEE OF \$20.00 WILL BE ASSESSED FOR ALL REGISTRATIONS RETURNED AFTER 8/1/2023**



**PLEASE DO NOT WRITE IN THIS BOX**



**FOR OFFICE USE ONLY**

**Registration Fee:** \$ \_\_\_\_\_  
**1<sup>st</sup> Communion Sacramental Fee:** \$ \_\_\_\_\_  
**After August 1<sup>st</sup> Late Fee – \$20** \$ \_\_\_\_\_  
**TOTAL:** \$ \_\_\_\_\_

**Cash** \_\_\_\_\_

**Check #** \_\_\_\_\_

**Date Received** \_\_\_\_\_