OFFICE USE ONLY	Date Received	Registration #
Name	Amount \$	Check #

RELIGIOUS EDUCATION	I / CONFIRMATION REGISTRATION 2024-25
Family Last Name	
Father (First Name)	
Mother (First name and Maiden	Name)
Address:	
	Zip Code
) ()
E-mail Address:	
Student(s) live(s) with: Parents	s Father Mother Other
Name:	nn emergency, we may need to contact a third party. Phone Number: ()
<u>Tuit</u>	tion and Fee Payment
TUITION	\$
FEES	\$
DISCOUNTS	(\$)
TOTAL	\$
or ten (10) month increme	eck or cash. Payments can be made in six (6) ents via a credit card through Vanco. The orm must be used. Payments must be
-	isti's policy that no child shall be denied religious ncial difficulty. Should this be the case, please of Office.

Tuition Schedule 2024

Registration prior to 7/1/24:

One student - \$200.00 per year

Two students - \$360.00 per year

Three or more students - \$440.00 per year

Registration 7/1/24 and beyond:

One student - \$220.00 per year

Two students - \$380.00 per year

Three or more students - \$460.00 per year

Fee Schedule 2024

Year Two and Genesis II

Sacramental fee (Reconciliation and Communion) – \$50.00

Confirmation I

Workbook fee - \$20.00

Retreat fee - \$40.00

\$60.00

Confirmation II

Retreat fee - \$30.00

Sacramental fee (Confirmation) \$80.00

\$110.00

<u>Discounts</u>

Payment in full by 6/30/24 \$25.00

Catechist Discount (50% of tuition only)

STUDENT INFORMATION

WE MUST HAVE A COPY OF EACH STUDENT'S BAPTISMAL CERTIFICATE ON FILE.

Catechist (teacher)	Digital data.	Cove	λЛ	_
STUDENT:	Birth date:	sex:	IVI	r
Attended RE last year: Yes No				
Grade in Fall: School Sacraments celebrated: (Please check) B	ntien Deservitetien	Campa		
Sacraments Celebrated: (Please check) B	apusm Reconciliation	_ Commu	mon_	
Health/Allergy Problems: Tir	Catachict			
rreferred Day: III	ne:CateChist: BILITY IS NOT GUARANTEED)			
(CLASS AVAILA	BILITY IS NOT GUARANTEED)			
STUDENT:	Birth date:	Sex:	M	F
Attended RE last year: Yes No				
Grade in Fall: School				
Sacraments celebrated: (Please check) Ba	ptism Reconciliation			
Health/Allergy Problems: Tine Preferred Day: Tine Tine Preferred Day: Tine Tine Preferred Day:				
Preferred Day: Tii	ne:Catechist:			
(CLASS AVAILA	BILITY IS NOT GUARANTEED)			
STUDENT:	Birth date:	Sex:	M	F
Attended RE last year: Yes No				
Grade in Fall: School				
Sacraments celebrated: (Please check) Ba		_ Commur	nion_	
Health/Allergy Problems:				
Preferred Day: Tir				
(CLASS AVAILA	BILITY IS NOT GUARANTEED)			
	Birth date:	Sex:	M	F
Attended RE last year: Yes No				
Grade in Fall: School				
Sacraments celebrated: (Please check) Ba	ptism Reconciliation	_ Commur	nion_	
Health/Allergy Problems:				
Health/Allergy Problems: Tir	ne:Catechist:			
(CLASS AVAILA	BILITY IS NOT GUARANTEED)			