



St. Christopher Church † Office of Religious Education
580 Brewer Street, East Hartford, CT 06118 † 860-895-8692

*"Let the children
come to me..."*

Family Registration Form for the 2017-18 School Year

Registration deadline: June 30, 2017

(Matthew 19:14)

Family Name: _____ Today's Date: _____

Address (Main Residence): _____

Father's Name: _____

Mother's Name: _____

Telephone Numbers:
_____ Home Cell Work

Telephone Numbers:
_____ Home Cell Work

_____ Home Cell Work

_____ Home Cell Work

E-Mail: _____

E-Mail: _____

Religious Affiliation: _____

Religious Affiliation: _____

Child(ren) resides with: Both Parents Mother Father Other: _____
(Name) (Relationship)

If other than a parent, please let us know who we should contact in the event of an emergency during class time:

Name: _____ Relationship: _____

Telephone Number: _____ Home Cell Work

Student Name: _____ Date of Birth: _____ Male Female

Religious Education Grade: _____ School Grade: _____ School Name: _____

Date & Place of Baptism: _____ (New students: Please attach copy of certificate)

Date & Place of Reconciliation: _____ (New students: Please attach copy of certificate)

Date & Place of First Communion: _____ (New students: Please attach copy of certificate)

Please tell us if your child has a special need, medical problem or specific allergy: _____

(All information remains confidential between parent, coordinator and catechist.)

TUITION FEES

Student Tuition: \$50.00 one child (2nd grade \$60.00)
\$90.00 two or more children (plus
an extra \$10.00 for each 2nd grader).

Registration after June 30: \$5.00 late fee
Please honor this date.

Make checks payable to: *St. Christopher Church*

Throughout the school year, pictures of the children may be taken during various activities. These pictures may be posted on the bulletin boards in our church. No child will be named in these photographs.

- I give permission for my child(ren) to be photographed.
- I do not give permission for my child(ren) to be photographed.

Parent Signature: _____

AN OPPORTUNITY FOR YOU!

Would you enjoy sharing your faith with children? If so, our Religious Education program could use your help! Please consider joining our team in one of the following positions:

- Catechist Teacher's Aide/Helper Substitute Hall Monitor

_____ Yes! I am interested in volunteering for the position I've checked above. Please call me to discuss.

Student Name: _____ Date of Birth: _____ Male Female

Religious Education Grade: _____ School Grade: _____ School Name: _____

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Date & Place of Reconciliation: _____ (New students: Please attach copy of certificate)

Date & Place of First Communion: _____ (New students: Please attach copy of certificate)

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