Sacred Heart 2022/2023 RE Registration

\$40 for the first child/\$60 for two or more

(Additional \$25 for sacrament years First Holy Communion)

RE is held on Sundays from 9:00 AM to 10:00 AM

Please complete student, family and emergency/medical information.

STUDENT INFOR	RMATION:		
Name:		Grade (22/23):	
Date of Birth:		Place of Baptism:	
FAMILY INFORM	ATION:		
Family Name:			
Father:	Address:		
Mother:	City:		
Phone:	Cell:	Email:	
EMERGENCY / ME	DICAL INFORMATIO	N:	
Emergency Contact Info	rmation:		
Name:		Phone:	
Relationship to child:			
Will you allow any adult	other than yourselves to	pick up your child after class? YES or NO	
If yes, Name:		Phone:	
Relationship to child:			
Does your child have an classroom activity? YE		sychological conditions which might affect their	
If yes, please give detai	ls:		
Parent Signature	:	Date:	
Tuition Due:			
Date Paid:	(Cash/Check	