

2010-2011
Our Lady of Guadalupe Parish Religious Education Program
5175 Cold Spring Creamery Road
Tel: 267-247-5374 Fax: 267-247-5402

Re- Registration Form

Family Information

Family Last Name: _____ E-mail (required): _____

Father's Name: _____ Mother's Name _____ (Maiden) _____

Address: _____
Number & Street City State Zip

Phone #: _____

Cell Phone #: _____

Parental Status: _____

Emergency Contact/Consent

Emergency Contact: Name _____ Phone: _____
Relationship to Child(ren) _____

Parental Consent for Medical Care: In case of an emergency, **I give permission for my child to receive emergency medical treatment and, if necessary, be transported to the nearest medical facility.**

Signed (Parent/Legal Guardian): _____ Date: _____

Returning Student Registration Information

Please Choose: **Tuesday Session** _____ **Thursday Session** _____

1. Name (Oldest Child) _____

School (10-11) _____ Grade _____

2. Name (Second Child) _____

School (10-11) _____ Grade _____

3. Name (Third Child) _____

School (10-11) _____ Grade _____

For Office Use Only:

Please note any changes or additions to health or learning issues for the above children. _____

New Student Information (1st Grade) Male___ Female___ Ethnicity _____

Name: _____
 Last First (Baptismal) Middle Nickname

School (10-11)_____ School Grade (10 -11)_____ School District _____

Date of Birth: _____ Place of Birth: _____
 City State

Parish of Baptism _____ (**Attach Baptismal Certificate**)

Address: _____ City/State _____ Date _____

Please note any allergies, medications, physical or learning disabilities, or other information pertinent to your child:

For Office Use Only:

Tuition Information

Sacramental Fee for students receiving **First Eucharist (Grade 2) or Confirmation (Grade6)** is **\$75.00 each**.

Policy for the issuing of refunds: If a student withdraws from the program before the third PREP session, a full refund will be issued, less a \$75 processing fee.

Payment by check or money order only (no cash) made payable to Our Lady of Guadalupe PREP.

Tuition

of students _____ \$ _____

Additional Fees

1st Eucharist \$ _____

Confirmation \$ _____

Other _____ \$ _____

Total Enclosed \$ _____

For Office Use Only: PDS # _____ Payment Plan _____

Date received _____ Check or Money Order # _____ Amount _____

Comments _____