



Parish Religious Education Program Registration

Student's Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____
Birth Date: _____ City: _____ State: _____
Entering Grade: _____

Father's Name: _____
Cell Phone: _____ Email: _____
Mother's Name: _____
Cell Phone: _____ Email: _____

For children going into K/1st Grade or new to the program, and not baptized in Sacred Heart Parish, please mail a copy of their baptismal certificate to, or drop it off at, the Parish office.

Emergency Contact: We always contact parents first in an emergency; however, please list another emergency point of contact below.

First Name: _____ Last Name: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____

Who may pick up your child beside a parent: _____
Are you able to help in the classroom occasionally: _____
If yes, who is available to help: _____

Medical Conditions

Allergies: _____
Conditions: _____
Medications: _____

Tuition: \$50 for the first child, \$20 for the second child, and \$10 for the third child (no cost for any additional children).

Please consult the Parish website at www.sacredheartofjesus.org for updates and cancellations to the class schedule. In addition, Catechists or Parish staff will use your email address to notify you of emergency cancellations.