## ST. MICHAEL THE ARCHANGEL RELIGIOUS EDUCATION ANNUAL REGISTRATION FORM

2281 STATE ROAD 580 CLEARWATER, FL.33763 - TELEPHONE (727) 797-2375 ext. 243

CGS -Level I (Ages 3-6) – Sunday morning 9:00-10:30am in the Atrium

Grade I – Sunday morning 9:30-10:30am.

OCIA for Children (Older Children) and Grade 2 & First Communion – Sunday morning 10:45am-12 noon

CGS -Level 2 (Ages 6-9 & First Communion) – Monday evenings 6:30-8pm in the Atrium

Grades 3-8 – Monday evenings 6:45 -8pm

Registration Fee is \$50.00 (Except for CGS Level1)

## **FOR STUDENTS PREVIOUSLY REGISTERED**

Family Name	First Name			Marital status	
		Father	Mother	S/M/D	
Address					
Street (P.O. Box)			City	Zip code	
Phone					
Home		Emergency		Cell	
Email Address					
PLEAS	E LIST CHILDREN	IN ORDER FROM	OLDEST TO YOUNGEST:		
Last Name	First Name		School	Grade	
Last Name	First Name		School	Grade	
Last Name	First Name		_ School	Grade	
Last Name	First Name		_ School	Grade	
**Sacraments to be received this Year		Did student attend last year?			
** <b>NOTE</b> : Copy of Baptismal certificate	and additional \$25	.00 fee must be er	nclosed for Reconciliatio	n & 1 <sup>st</sup> Communion Students	
Health problems or other special	needs/medications	s? (Confidential In	formation) Please list the	e child's name and explain.	