

MAILING NAME: _____ HOME PHONE: _____
 (This is the name I will use on the envelope when sending you mail)

► E-MAIL ADDRESS: _____

Mailing Address: _____ City: _____ Zipcode: _____

Father: _____ Employed at: _____ Phone (if allowed): _____
 Mailing Address (if different): _____ City: _____ Zipcode: _____

Mother: _____ / _____ / _____ Employed at: _____ Phone (if allowed): _____
First Lastname Maiden
 Mailing Address (if different): _____ City: _____ Zipcode: _____

RELIGION: Father: _____ Mother: _____ **CHILDREN LIVE WITH:** Parents / Father / Mother / Shared / Other _____

COMMENT: _____

Religious Education Student Information for grades 1 – 11

FIRST NAME	LAST NAME	SEX	BIRTHDATE	GRADE	YEAR(S)	SACRAMENT(S) RECEIVED
		M F		2011/2012		<u>BAPTISM</u> <u>EUCCHARIST</u> <u>RECONCILIATION</u>
_____	_____		_____	_____	_____	_____
				(see reverse side)		
Is this the 1 st year of Religious Education for this student (Catholic School counts)? Yes No				Is this student new to St. John the Baptist Religious Ed. Program? Yes No		

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		M F		2011/2012		<u>BAPTISM</u> <u>EUCCHARIST</u> <u>RECONCILIATION</u>
_____	_____		_____	_____	_____	_____
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VOLUNTEERS ARE NEEDED! Please consider volunteering for one of the following...
NOTE: The Registration Fee is waived for all H.S. Group Leaders and Elementary Teachers

_____ HIGH SCHOOL (every other Wednesday): Wednesday night Group Leader → In your home – someone else’s home – at school.
 _____ ELEMENTARY (every other Wednesday): _____ Teacher _____ Teacher Aide _____ Substitute Teacher

If you are using Scrip, please do not pay now. You will be billed if your Scrip credit doesn't cover the full amount.

SEE REVERSE SIDE FOR TUITION INFORMATION → REGISTRATION FEE = \$60.00 PER STUDENT IF REGISTERED BY JUNE 30, 2011
 DEPOSIT ENCLOSED: \$ _____ CHECK #: _____ DATE: _____ BALANCE DUE: \$ _____

_____ Check here if you have a **SCRIP** credit to apply to this year’s tuition (pay nothing now if you use **SCRIP**, we will bill you later if there is still a balance due).

NOTE: ALL PREVIOUS FEES MUST BE PAID IN FULL BEFORE THE NEW REGISTRATION FORM WILL BE ACCEPTED.

TUITION FEE SCHEDULE

Please indicate the # of students in the proper blank.

G.S. TEACHERS & H.S. GROUP LEADERS ONLY → \$0.00 PER STUDENT

(please note: This does not apply to subs or teacher aides. It does apply to regularly scheduled office helpers)

If you are a registered member of St. John the Baptist Parish → \$60.00 PER STUDENT

For those who are not registered members of St. John the Baptist Parish → \$80.00 PER STUDENT

PAYMENT DUE = (# OF STUDENTS) x (PROPER REGISTRATION FEE)

NOTE: 50% OF THE TOTAL PAYMENT IS DUE WITH THE REGISTRATION FORM. The remaining balance must be paid by August 25, 2011.

\$ _____ TOTAL PAYMENT DUE
\$ _____ Payment Enclosed (Payable to SJB Religious Ed.)
\$ _____ Remaining Balance Due by August 25, 2011

MAIL OR DELIVER TO:

**St. John the Baptist
Religious Education
116 Pleasant Street
Plymouth, WI 53073**

Please List any Special **LEARNING NEEDS** we should be aware of (including hearing or sight problems):

Please list any **MEDICAL CONDITIONS** that we should be made aware of (severe allergies, seizures, etc):

BAPTISMAL INFORMATION

If you have someone in 1st, 2nd or 11th grade, or are new to the SJB CCD Program, or have never received one of the sacraments here, and were not baptized here, then please submit a copy of the baptismal certificate along with the registration form for each student.

We are currently updating all of our baptismal records. If your child was not baptized here, and you have not previously submitted a copy of your child/ren's' baptismal certificate, then please submit one with this registration form.

††††† NOTE ☺☺☺☺☺: If your child(ren) was/were baptized other than Catholic, you will need to talk to Father about making a "Profession of Faith" (which is basically being formally received into the Church and entered into our records).