

GRADE 1 - 5 CONFIDENTIAL REGISTRATION FORM

2017 - 2018

Last name of students: _____ Family name if different: _____

Telephone: (H) _____ (W) _____ (Cell) _____

E-mail: _____ **THIS IS OUR MAIN WAY TO COMMUNICATE WITH YOU**

Address of students: _____

Father's full name: _____

Address if different: _____

Mother's full name: _____ Maiden: _____

Address if different: _____

Student's full name: _____ DOB _____

Sex: _____ School _____ Grade 2017 - 2018 _____

Church of Baptism: _____ Year: _____

City: _____ State: _____ ZIP: _____

Does this child have any learning, behavior or health issues we should be aware of in order to provide an appropriate learning environment? _____ If yes, please explain on separate sheet.

Student's full name: _____ DOB _____

Sex: _____ School _____ Grade 2017 - 2018 _____

Church of Baptism: _____ Year: _____

City: _____ State: _____ ZIP: _____

Does this child have any learning, behavior or health issues we should be aware of in order to provide an appropriate learning environment? _____ If yes, please explain on separate sheet.

Student's full name: _____ DOB _____

Sex: _____ School _____ Grade 2017 - 2018 _____

Church of Baptism: _____ Year: _____

City: _____ State: _____ ZIP: _____

Does this child have any learning, behavior or health issues we should be aware of in order to provide an appropriate learning environment? _____ If yes, please explain on separate sheet.

Fee Schedule on back

Fee Schedule 2017 – 2018

\$150.00 x # of children = _____ For registration submitted before June 1ST deduct \$50 per child

Amount paid _____

Date paid _____

Jesus' Parting words: "Go, therefore, teaching them to observe all that I have commanded you. And behold, I am with you always until the end of the age."

Matthew 28:19,20

Passing on our faith is something we are all called to do. To make our Religious Education program successful, we need many volunteers. Would you please look over the following list of needs and see if the Lord is calling you to respond?

*** qualifies for free registration fee if submitted by June 1st**

+ qualifies for free registration fee for 1 child if submitted by June 1st

*** Teachers** (Teaching manual and assistance available) *Gr. 1 – 5 Wednesdays 4:00 - 5:00* _____

Substitutes (Teaching manual and assistance available) *Gr. 1 – 5 Wednesdays 4:00 - 5:00* _____

+ Monitor / hall/door *To monitor door and halls during class time Wednesdays 4:00 - 5:00* _____

+ Babysitting *To watch children of the teachers and other volunteers Wednesdays 4:00 - 5:00* _____

+ Office Help at NDA_ *Helping out at the office @ NDA Wednesdays 4:00 - 5:00* _____

If you can be of any assistance, please fill in the form below and return with registration, drop it at the rectory or call Janet Hickey at the rectory, 749-3577.

Name _____ Phone # _____

Email address _____

Volunteer Position you are available for _____