

HOLYLAND CATHOLIC RELIGIOUS EDUCATION PROGRAM ENROLLMENT FORM (2018-2019)

PARENT/ GUARDIAN NAME: _____
(last) (first) (middle initial)

PARENT/ GUARDIAN NAME: _____
(last) (first) (middle initial)

ADDRESS _____

PHONE(s) (w/area code) _____ (cell phones) _____

Emails: _____

PARISH WHERE REGISTERED: _____

STUDENT #1: _____ / / _____

STUDENT #2: _____ / / _____

STUDENT #3: _____ / / _____

STUDENT #4: _____ / / _____

(first) (middle) (last) Birth date Grade

SACRAMENTS RECEIVED (Circle "yes" or "no")

	Student #1		Student #2		Student #3		Student #4	
Baptism	yes	no	yes	no	yes	no	yes	no
First Reconciliation	yes	no	yes	no	yes	no	yes	no
First Communion	yes	no	yes	no	yes	no	yes	no

TUITION PER FAMILY

(A PAYMENT MAY BE MADE AT TIME OF REGISTRATION OR AT THE FIRST CLASS)

MAKE CHECKS PAYABLE TO: ST. ISIDORE PARISH

Number of children enrolled:	1	\$ 50.00
	2	\$100.00
	3 or more	\$150.00
Additional Workshops Fee - 2nd Grade (First Reconciliation & First Communion)		(+ \$ 20.00)
	Total	
	Amount Paid	
	Balance Due	

EDUCATION HISTORY

If your child was enrolled in a religious education program other than St. Isidore, St. John the Baptist/St. Mary Parish last year, please specify the parish and city: _____

NOTE: if you child was baptized at a parish other than St. Isidore the Farmer, St. John the Baptist or St. Mary, please provide a copy of you're their baptismal certificates.

See reverse side

