

**St. Catherine of Siena Parish
CCD Religious Education Classes
Family Registration Form 2008 – 2009**

1. Student's Name _____

Date of Birth _____ Grade during 2008 – 2009 school year _____

School to be attended 2008 – 2009 _____

Was student registered in program last year? Yes No

2. Student's Name _____

Date of Birth _____ Grade during 2008 – 2009 school year _____

School to be attended 2008 – 2009 _____

Was student registered in program last year? Yes No

3. Student's Name _____

Date of Birth _____ Grade during 2008 – 2009 school year _____

School to be attended 2008 – 2009 _____

Was student registered in program last year? Yes No

Father's Name _____

Mother's Name (including maiden name) _____

Student(s) resides with: Mother Father Both

Student's address: _____

Telephone #: _____

Parent's email: _____

**Fees for 2008 – 2009: \$85 for one child; \$140 for two children; \$180 for 3 or more children
Checks made payable to St. Catherine's**

Are you a registered member of this parish? Yes No

Does your registration fee accompany this form? Yes No

If yes, amount: _____ If no, please send in prior to first day of CCD, September 7th, 2008

Any additional information that you would like us to have: _____

Thank You!