

SACRED HEART & ST. PIO RELIGIOUS EDUCATION REGISTRATION FORM

2023-2024

CLASSES HELD AT SACRED HEART

TUITION: \$110.00 PER CHILD FOR THE FIRST TWO CHILDREN: HOUSEHOLDS WITH THREE OR MORE CHILDREN REGISTERED EACH ADDITIONAL CHILD IS FREE.

RETURN FORM TO : SACRED HEART RELIGIOUS EDUCATION 751 MAIN AVENUE, BAY HEAD, NJ 08742

Student Information: (PLEASE UPDATE ANY MISSING OR CHANGED INFORMATION)

Student Name: _____ M/F _____ CCD Grade 2023-2024 _____

Student Address: _____

Date of Birth: _____ PUBLIC SCHOOL ATENDING: _____

SPECIAL NEEDS: (Allergy, Physical, Learning Disabilities) _____

FATHERS INFORMATION: (PLEASE UPDATE ANY MISSING OR CHANGED INFORMATION)

NAME: _____ EMAIL: _____
ADDRESS: _____ CELL PHONE: _____

MOTHERS INFORMATION: (PLEASE UPDATE ANY MISSING OR CHANGED INFORMATION)

NAME: _____ EMAIL: _____
MAIDEN NAME: _____
ADDRESS: _____ CELL PHONE: _____

All information is to be completed as asked even if on file with Sacred Heart

1. BAPTISM: (y/n) _____ Baptism Date: (MM/DD/YY) ____/____/____

Church Name: _____ Address: _____

2. FIRST RECONCILIATION: (y/n) _____ First Reconciliation Date: ____/____/____

Church Name: _____ Address: _____

3. FIRST COMMUNION: (y/n) _____ First Communion Date: ____/____/____

Church Name: _____ Address: _____

Sacred Heart & St. Pio 2023 2024 Religious Education Registration

PERMISSION TO USE YOUR CHILD'S PHOTO WITHIN THE CCD PROGRAM

_____ (*initial*) As the parent/guardian of the child listed above, I give my permission for his/her Picture to be used as a representative of the Sacred Heart Religious Education program. This photo may be posted on our parish website, posted within our Religious Education program or facility.

CUSTODIAL ISSUES

Yes / No Are there custodial parent issues? **If yes, please attach written details.**

Father / Mother Who has primary custody? If other than father or mother, please provide name / relationship _____

OTHER INDIVIDUALS THAT WILL BE PERMITTED TO PICK UP YOUR CHILD:

Name: _____

Relationship Cell: - -

Name: _____

Relationship Cell: - -

Name: _____

Relationship Cell: - -

Name: _____

Relationship Cell: - -

CLASSES HELD AT SACRED HEART

Scheduled time is Sunday's 9:30 – 10:45

Please make sure all information for Baptism, First Reconciliation and First Communion are completed, even if on file with Sacred Heart