

**Saint Stanislaus Kostka Parish  
Religious Education Program  
Registration Form 2024-2025**

<b>Please check one:</b> <input type="checkbox"/> Returning <input type="checkbox"/> New
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Family Name: \_\_\_\_\_ Home Phone # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone # \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Mother's Email: \_\_\_\_\_ Work Telephone # \_\_\_\_\_

Cell Phone # \_\_\_\_\_

**Please circle:**    **Child/Children reside(s) with:**                  Both parents                  Mother                  Father                  Guardian

**Family Information:**    Single Parent:    Y    N                  Parent(s) Deceased    Y    N                  Parents Separated/Divorced    Y    N

Student's Last Name	Student's First Name	Years of Rel. Ed.	Birth Date	Check Sacraments Received			Grade Entering Sept. 2024
				Baptism	Penance	Eucharist	

**Parish Collection Envelope # (required):** \_\_\_\_\_

(Please fill out the backside of the form.)

**Please complete the following if your child has special needs:**

This important information helps the Catechist meet your child's specific needs and will not categorize your child in any way.

Child's Name	Grade	ADD/ ADHD	Special Services: IEP, Resource Room, In-Class Support	Medication/ Food Allergy	Medical Condition/Other Please explain

Additional explanation: \_\_\_\_\_

**Emergency Contact Information** (Best person to reach during Religious Education hours.)

1. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relation to Child \_\_\_\_\_

2. Name \_\_\_\_\_ Phone \_\_\_\_\_ Relation to Child \_\_\_\_\_

-Registration is \$150.00 per child with a maximum of \$350.00 per family. The Registration Fee must be submitted with this form.  
 Please make checks payable to: **St. Stanislaus Kostka Church**. **Re-registrations received after August 1, 2024 will incur a late fee of \$25.00 per student.**

-A copy of the student's Baptismal record must be attached for **new** students.

-If entering a grade other than first, proof of attendance at another parish's program is required.

Parent/Guardian Signature: \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Total Due:     \$ \_\_\_\_\_

Amount Paid:   \$ \_\_\_\_\_

Cash \_\_\_\_\_   Check \_\_\_\_\_   Check # \_\_\_\_\_