

St. Mary Magdalen Catholic Church

RELIGIOUS EDUCATION/FAITH FORMATION REGISTRATION FORM 2024-2025

Growing as disciples through prayer, Scripture, Liturgies, Sacraments, and Services

Date:	Office Use Only:				
New Registration:	Placement:				
Returning:					
Do not write in here / No escriba aquí.					
	SACRAMENTS				
BAPTISM: YES NO If yes,	where was your child baptized?				
Please provide your name and addre	ess if it is not in this Parish. BRING A COPY OOF REGISTRATION:	F THE			
Date of Baptism:					
FIRST COMMUNION: YES NO If	f yes, where did your child make the First Comr	nunion?			
If is no	ot in this Parish, please provide name and addres	SS:			
PLEASE BRING A COPY OF THE CERTIFICAT CHILDREN	TE, OR WE WON'T BE ABLE TO REGISTER YOUR C	HILD /			
SECT	ΓΙΟΝ 1 (Please Print)				
Child's Last Name:	First Middle:				
Child's Home Address:	City Zip Code: _				
Primary Phone Number:	Date of Birth:				
Place of Birth:	Country:				
Age as September 1st, 2024: Grade on September 1st, 2024:					
Name of the School Child Attend:					
☐ Public ☐ Private ☐ Charter	☐ Other:				
Child lives with:	☐ Mother ☐ Father ☐ Other:				
Was the child enrolled in a Catholic Religio year? \square Yes \square No \square Where?	ous Education Program or Catholic School during	the last school			
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FATHER 1	PARENT S/GU	ARDIANS (L	ist Below)	MOTHER
Relationship to child:		Relationship	to child:	
Name:		Name (Maide	n):	
Cell Phone: ()		Cell Phone: (_)	
Religion:				
Marital Status:		Marital Status	S:	
E-mail:		E-mail:		
Comments:				
	EMERGEN	NCY INFORM	IATION	
If, in the event of an emergency, y	=-			with the following:
Name:				
Address:				
Phone Number: ()				
Comments:				_
Dear Parents, Thank you for allowing us to a	worlz with wour of	hild /children T	The information prov	rided is necessary for the
Thank you for allowing us to vergistration. Please note that we				
August 26, 2024. After this date,	1 0		, ,	ster from July 22, 2024, to
August 26, 2024. After this date,	the fees will return	n to the standard	a rate.	
\square Full or partial fee paym	ent is required.	Complete pa	yment is due by So	eptember 20, 2024 . No
child is excluded from any prog	gram due to the i	nability to pay.	However, arrangeme	ents must be made at the
Religious Education Office before	ehand and approve	ed by the Pastor	or the Director of Reli	gious Education.
	FEE SCHED	ULE (Office	use only)	
	Before 08/26	<u>After 08/26</u>		
1st Child Voorly Dogistration	\$175.00	\$ 225.00		
1st Child Yearly Registration				
2 nd Child Yearly Registration	\$225.00	\$ 250.00		
3 rd Child Yearly Registration	\$250.00	\$ 300.00		
Additional Child		\$ 90.00		
Catholic Bible	\$ 30.00			
Sacramental Year (2 nd Year) Fee:	\$ 230.00			
	,			
Total Due:				
]	PAYMENT		
Payment: Receipt #		Cash:	Credit Card	_ Check:
Balance Due:				
Authorized Person:		Initial	approval:	
Any special accommodation/r number of seats in the room. If you register you	requests must be	made in writin a additional la	g by November 8 ^{. All} te fee of \$50.00 wi	classes are filled according to the
you for giving us the privilege	to work with you	ır children.		3
Shalom! Office of Religious Education St. Mary Magdalen Catholic Chu	ırch Sunny Isle Be	ach, FL		T. T.

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