

CARROLL CATHOLIC RELIGIOUS EDUCATION REGISTRATION 2017-2018

Family Name _____

Parish _____

Will the following children in grades K-4 be attending CCRE on days CCSD dismisses early?

Please check: Yes _____ No _____

Child's Name			Birth	Grade	Baptism (<i>needed for 1st & 9th graders</i>)			Sacraments Received (check)		
First	Middle	Last	Date	in Fall	Date	Church	City, State	Reconcil.	Comm	Confirm

Please attach any other helpful information such as medical conditions, special learning needs, step-parents ...

Name of Head of Household	Name of other parent
Religion	Religion
Workplace	Workplace
Cell/Work Phone	Cell/Work Phone
E-mail Address @	Marital Status
Address	Mom's Maiden Name
City	Zip

CCRE is possible because of volunteers. Be a part of making CCRE the best possible program for our children.

*****Please put your initials by a way you can help.***** Thank you.

- | | |
|--|-------------------------------------|
| _____ Catechist for grades _____ | _____ Substitute teach grades _____ |
| _____ Aid for grades _____ | _____ Supervise playground at 3:15 |
| _____ Create tokens of Appreciation for catechists | _____ Supervise parking lot at 5:00 |

Tuition is \$60 a child (registered before August 15) (Late Registration is \$70.)

Contact me about financial aid.

Date: _____ **Fees** _____ **Paid** _____ **Unpaid** _____ **Will Pay Balance By** _____