

**GRADES 1-8 SS. John and Paul 2017-2018 G.R.A.C.E. Registration Form**

<b>TUITION: Parishioners:</b>	<b>By 6/30</b>	<b>After 6/30</b>
1 Child	\$ 75.00	\$100.00
2 or more	\$125.00	\$150.00
NON-Parishioners each child	\$150.00	\$175.00
<b>Reminder: Tuition may be paid through online giving.</b>		

Today's Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Registered in the Parish \_\_\_\_ Yes \_\_\_\_ No

**Family Last Name:** \_\_\_\_\_ **Primary Phone:** \_\_\_\_\_ **Email** \_\_\_\_\_

Street Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address if different \_\_\_\_\_ City/State: \_\_\_\_\_ Zip \_\_\_\_\_

**FATHER:** Marital Status: \_\_\_\_M \_\_\_\_D \_\_\_\_S \_\_\_\_W

**MOTHER:** Marital Status: \_\_\_\_M \_\_\_\_D \_\_\_\_S \_\_\_\_W

(Last Name \_\_\_\_\_ ( First Name \_\_\_\_\_  
Phone \_\_\_\_\_

(Last Name \_\_\_\_\_ ( First Name \_\_\_\_\_ ( Maiden \_\_\_\_\_  
Phone \_\_\_\_\_

**DESIGNATED MONTHLY G.R.A.C.E. SESSION FOR THE WHOLE FAMILY [Please read before checking the boxes below]**

- CHILDREN IN GRADES 1-8 MUST BE ACCOMPANIED BY AT LEAST ONE PARENT. **BABYSITTING IS NOT OFFERED.** ALL SESSIONS ARE FROM 6:00 – 8:30 PM.
- ALL FAMILIES: Choose between SUNDAY - TUESDAY.

Given the information above, mark your **first (1) and second (2)** CHOICES for the evening you and your family will attend. [we will confirm your session]

Please indicate the number of parents ordinarily attending:

\_\_\_\_ SUNDAY \_\_\_\_ TUESDAY

\_\_\_\_ 1 \_\_\_\_ 2

CHILD NAME: <i>First Name (and last name if different)</i>	GRADE	SCHOOL	BIRTHDATE	GENDER
#1 _____	_____	_____	____/____/____	____M____F
#2 _____	_____	_____	____/____/____	____M____F
#3 _____	_____	_____	____/____/____	____M____F
#4 _____	_____	_____	____/____/____	____M____F

**Grades 1-6 AGE SPECIFIC SESSIONS**  
Please check off the session that your child will be attending:

\_\_\_\_ MONDAY 5:00-6:30 p.m.  
or  
\_\_\_\_ TUESDAY 6:00-7:30 p.m.

**OFFICE USE ONLY**

Date: \_\_\_\_\_

Amount: \_\_\_\_\_

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

**PLEASE COMPLETE BACK SIDE**

Family Last Name \_\_\_\_\_

**SACRAMENT REQUIREMENTS**

It is required that all children eligible to prepare for the reception of a sacrament have attended two consecutive years of faith formation and attending current year

- For the Sacrament of **Reconciliation, Eucharist** and **Confirmation: required attendance at all monthly sessions, all age-specific sessions, and all sacrament prep sessions** for **the two previous years and attending current year.**

**PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION FOR EACH CHILD.**

CHILD'S NAME	GRADE	BAPTISM	FIRST EUCHARIST	CONFIRMATION	RECONCILIATION
#1 _____	_____	Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___
#2 _____	_____	Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___
#3 _____	_____	Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___
#4 _____	_____	Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___	___ Yes ___ No ___

MEDICAL CONDITIONS / MEDICATION

\_\_\_\_\_

EMERGENCY CONTACT PERSON(S)

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Relationship: \_\_\_\_\_

CUSTODY OR OTHER ISSUES WE NEED TO BE AWARE OF: \_\_\_\_\_

\_\_\_\_\_

If you are new to our parish this year, NAME THE CHURCH where you last attended and the LAST COMPLETED GRADE of religious formation for each of your children:

Name of Church: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_

Last religious formation grade attended by: Child #1 – Grade: \_\_\_\_\_, Child #2 – Grade: \_\_\_\_\_, Child #3 – Grade \_\_\_\_\_, Child #4 – Grade \_\_\_\_\_

\_\_\_\_\_ Please indicate here if **THIS YEAR** will be the first year of religious formation for the children.

**OPT OUT MEDIA RELEASE: (NB: we never publish names with photos).**

Permission is not given for use of photos in our parish bulletin and other parish media unless otherwise notified.

Signature \_\_\_\_\_ /

Date \_\_\_\_\_