

**HOLY FAMILY PARISH
RELIGIOUS EDUCATION 2019 - 2020 REGISTRATION**

HF K3 - 8th grades meet from 9:10 – 10:15 am (between Masses) at Holy Family Parish School.
Kick-off parent meeting is Sunday, September 8th at 9:10 am in HF School Cafeteria.

Please complete this form and the volunteer form completely.

Register by August 9th and save \$20 a child / Up to \$60 per family.

Return completed forms along with payment in an envelope marked Religious Education to Holy Family Parish office, place in the collection basket at any of the parish Masses or mail to:

Holy Family Religious Education Office: 4849 N. Wildwood, Whitefish Bay, WI 53217

TUITION	Number of children		FEES	=	TOTAL
Early Per Child Tuition received by August 9 th 2019 (4 th + Child is Free)		X	\$170.00	=	
Per Child Tuition received after August 9 th 2019 (4 th + Child is Free)* Family max \$570		X	\$190.00	=	
Tuition Total					\$
+Sacramental Fee (Preparing for First Reconciliation and Eucharist)		X	\$50.00	=	
Tuition + Sacramental Fee = Family Total					\$
Early registration deposit of 50%					- \$
Total Due by November 1, 2019					\$

It is the Archdiocese's mandate that children be enrolled in a religious education program one year prior to receiving First Eucharist. **NOTE: If you have a 2nd grade or older child preparing for First Reconciliation & Eucharist you will receive an additional sacramental registration form via email.**

FAMILY'S LAST NAME: _____

____ We are registered parishioners of _____ Parish.
(Name of Parish where you are registered)

____ We are NOT registered at ANY Parish. **+Note – Parish registration is required for participation in the Holy Family sacramental education program. Contact the parish office, 414-332-9220.**

____ (Please print clearly)
Family E-mail Address to receive weekly reminders / Check here if this is a new email _____

Home Phone # _____ Do not have a home land line _____

Family Address where information should be sent City Zip

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Father/Guardian Last Name First Cell Phone Religion

Father/Guardian Address (If different than above) City Zip **Fathers E-mail Address**

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Mother/Guardian Last Name First Cell Phone Religion

Mother/Guardian Address (If different than above) City Zip **Mother E-mail Address**

*The maximum \$570 Fee is combined for ALL Christin Formation K-12 (excluding sacramental fees). No child will be denied Religious Education because of the family's financial circumstances. If you need to make special arrangements, please contact: The Religious Ed. Office 332-8156 x230

