

**Holy Angels, St. Mary & Sts. Peter & Paul Parishes**  
**JUNIOR HIGH**  
**Religious Education / PSR Registration 2011-12**  
*Due to your Parish Office by August 15, 2011*

Father's name \_\_\_\_\_ Religion \_\_\_\_\_

Address \_\_\_\_\_  
# Street City State Zip

Phone #'s: H: \_\_\_\_\_ W: \_\_\_\_\_ C: \_\_\_\_\_

Mother's name \_\_\_\_\_ Maiden name \_\_\_\_\_  
(needed for sacramental records)

Address \_\_\_\_\_  
# Street City State Zip

Religion \_\_\_\_\_ **Parent/Family E-mail:** \_\_\_\_\_  
(for communication reminders)

Phone #'s: H: \_\_\_\_\_ W: \_\_\_\_\_ C: \_\_\_\_\_

We are a registered member of \_\_\_\_\_ Parish

**JUNIOR HIGH STUDENTS**  
**(Please be attentive to our attendance policy of missing no more than 6 classes.)**

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1. First	Middle	Last name	Grade Sept.,11	Birthday
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2. First	Middle	Last name	Grade Sept.,11	Birthday
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**PUBLIC SCHOOL DISTRICT:** \_\_\_\_\_

Do any of your Junior High children have food allergies or special needs we need to be aware of? Is a child working under an IEP in the Public School? If yes, are there any behaviors that would be helpful for the Religion Teacher to know?

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<b>Child's name</b>	<b>Special need or allergy</b>
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**CLASS PREFERENCES** (please mark a 1<sup>st</sup> and 2<sup>nd</sup> choice)

**Wednesdays:** 6:15 -7:30 pm at Faith Formation Center (Jackson St.) (levels 7 & 8) \_\_\_\_\_

**Sundays:** 10:30a.m. -11:30 am at SM Church lower room (**level 8 ONLY**) \_\_\_\_\_

6:15 – 7:30 pm Class at Holy Angels preceded by the 5:00 pm \_\_\_\_\_  
LifeTeen Mass (levels 7 & 8)

**Registration of a student for Confirmation is allowed only if the student has completed at least one full year of religious education immediately prior to beginning the sacramental preparation year.**

**Please also fill out the Emergency Medical Form (one for each child) and return it with your registration.**

**FEES: RELIGIOUS EDUCATION**

**\$45.00 per child (Maximum family fee of \$135.00 including levels 1-6))**

**FEES: SACRAMENTAL**

**\$40.00 for Confirmation (Religion level 8)**

Please make checks payable to your parish

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For office use only

Amount paid \$ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Religious Education fees @ \$45.00 = \_\_\_\_\_

Parish: HA \_\_\_\_\_

\_\_\_\_\_ Confirmation @ \$40.00

SPP \_\_\_\_\_