

FAMILY REGISTRATION
2018-2019 SACRED HEART CHURCH PARISH SCHOOL OF RELIGION

Please return this family form along with one student registration form for each child.
Make checks payable to **"Sacred Heart PSR"**.
Please review this information and mark with any changes before submitting this form.

Tuition Schedule for K-8 and Preschool:

One Student – \$40.00

Two Students – \$50.00

Three or more Students – \$60.00

(Please Print)

Family Last Name: _____ Family registered in Parish: Yes: ____ No: ____
Address: _____ Phone #: _____
Street City Zip Cell #: _____
e-mail address: _____

Father's name: _____
First MI Last (if different) Natural or Step Father Religion Deceased Marital Status
Mother's name: _____
First MI Last (if different) Natural or Step Mother Religion Deceased Marital Status

Please list all children in the household

Child:	First	MI	Last Name (if different)	Gender	Birthdate	Baptism Date
Child:	_____	_____	_____	_____	_____	_____
Child:	_____	_____	_____	_____	_____	_____
Child:	_____	_____	_____	_____	_____	_____
Child:	_____	_____	_____	_____	_____	_____
Child:	_____	_____	_____	_____	_____	_____

Emergency Contacts (other than parents)	Phone	Relationship
Emergency #1: _____	_____	_____
Emergency #2: _____	_____	_____

FOR OFFICE USE ONLY:

Date Received: _____ Volunteer: _____ Amount Due: \$ _____

Check #/Cash Paid: _____ Amount Paid: \$ _____