## HOLY TRINITY HIGH SCHOOL FAITH FORMATION

## SUNDAY 5:00 - 6:30 PM 2025-2026

Student's Name:			Male/Female
Address:			City:
Date of Birth:	Student's Email:_		
Parent's Email:		Student's Grade:	
Year attending this program?	First Year	Second Year	
Classes - Language Preference	e: English	Spanish	
Name	must be the same as	<mark>on the Baptismal Certif</mark>	<mark>icate</mark>
Father's Name:		Mother's Name:	
<b>Work Phone:</b>		Work Phone:	
Religion:/_			
(Him)			
Please bring a copy of	the Baptism & First	Communion certificate	on the first day of class
las the student been Baptized?	YES/NO		
Name of Church:			
Date Baptized:	_		
Church address:			_
las the student received First (			
Name of Church:		_	
Date received:			
Church address:			
las the student attended confii			
Name of Church:			
Church address:			
	<u>OFFIC</u>	E USE ONLY	
	TUIT	ION FEES	
<b>Parishioner of Holy Trinity</b>			
	children: \$120.00	3 children: \$160.00	4 or more children: \$200.00
Non-Parishioner of Holy Tri 1 child: \$120.00 2		3 children: <b>\$2</b> 00.00	4 or more children: \$240.00
A registration LATE I	FEE of \$20 will be ch	<mark>arged per family after (</mark>	October 12th, 2025
			ty Religious Education Program)
# of Children in Religious Ed:	Whic	h program(s):	
Tuition Due:			
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