



Holy Trinity Catholic Church
Religious Education 2026-2027
(Grades 1-6)

Wednesdays at 5:00 PM-6:30 PM

Please complete in full— one form for each child
(Incomplete forms will not be accepted)

1st Year _____

2nd Year _____

Student's Name: _____

Address: _____ City: _____ Zip: _____

Telephone #: _____ Male / Female Grade: _____

Place of Birth: _____ Date of Birth: _____ Age: _____

To serve you better, please indicate if your child has a medical condition or disability that we should know about: _____

(NAMES MUST BE THE SAME AS ON THE BIRTH/BAPTISMAL CERTIFICATE)

Father's Name: _____ Mother's **Maiden** Name: _____

Cell/Work Telephone: _____ Cell/Work Telephone: _____

Email: _____

Date of Baptism: _____ Copy of Certificate must be provided or on file.

Church of Baptism: _____

Church Address: _____

Church City: _____ State: _____ Zip: _____ Country: _____

Has your child received First Eucharist? Yes / No

For Office Use Only

Tuition Fees:

Registration rate:

1 child \$80.00 2 children \$120.00 3 children \$160.00 4 or more children: \$200.00

Non-registered Parishioners rate:

1 child \$120.00 2 children \$160.00 3 children \$200.00 5 or more children: \$240.00

Late Registration fee of \$20.00 per family after August 31, 2026

of Siblings in Religious Ed: _____ Family ID #: _____

Name and Grade of Siblings: _____

Tuition Due: _____ Tuition Paid: _____ Tuition Balance: _____

Date Registered: _____