

IMMACULATE CONCEPTION RELIGIOUS EDUCATION
Malden/Medford
Registration Form: 2026-2027

Family Last Name: _____

Home Address: _____ **City** _____ **ZIP** _____

Home Phone: _____

Father's Name: _____ **Father's Cell:** _____

Mother's Name: _____ **Mother's Cell:** _____

Primary Email: _____

Emergency Contact Name: _____ **Phone #:** _____

Student's First Name: Last Name:	Date of Birth	Grade Entering Fall 2026	Tuition Cost \$75 per student	Special Needs/ Allergies

Please check below the class or classes your child(ren) will be attending:

_____ **Grades K – 2 - Classes - Sunday 10:00 AM – 11:15 AM beginning 10-4-2026**

_____ **Grades 3 – 7 - Classes - Sunday 8:45 AM – 11:15 AM beginning 10-4-2026**

SACRAMENTAL PROGRAMS

_____ **First Holy Communion – Classes - Sunday 8:45 AM – 11:15AM beginning 10-4-2026**

_____ **Confirmation - Grades 8 – HS-Classes-Sunday 4:45 PM–7:15PM beginning 11-1-2026**

Please - return the Registration Form and the tuition of \$75. per student to:

Immaculate Conception Parish
10 Fellsway E
Malden, MA 02148

or simply, drop them off at the office door, in the Collection Box at Church

If you have any questions, please call the Parish Office at 781-324-4941
and ask for Rosey or Father Capone.