

# Holy Apostles Religious Education

## REGISTRATION FORM

Grades 1-5 2025-2026

Family Last Name \_\_\_\_\_

Address \_\_\_\_\_

City/Town \_\_\_\_\_ Zip code \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell #: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell #: \_\_\_\_\_

**Regularly checked E-MAIL:** \_\_\_\_\_

Name of Person associated with this email: \_\_\_\_\_

In Case of Emergency #: \_\_\_\_\_

\*If at any time, contact phone numbers or regularly checked email changes, please notify the office so we can update our records.

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STUDENT(S) registering information:

**Classes are:**

**Monday 4:15pm to 5:15pm (Grades 1,2,3) & Monday 5:30pm to 6:30pm (Grades 4 & 5)**

**Tuesday 4:15pm to 5:15pm (Grades 1-5)**

**\*Grade 1 students need a copy of their baptismal certificate in order to enter our program. If you were baptized at Holy Apostles, please make a notation on this form.**

| Name  | Grade | School | Check Day                    | or No Preference  |
|-------|-------|--------|------------------------------|---|
| _____ | _____ | _____  | <input type="checkbox"/> Mon | <input type="checkbox"/> Tues <input type="checkbox"/> No Pref. |
| _____ | _____ | _____  | <input type="checkbox"/> Mon | <input type="checkbox"/> Tues <input type="checkbox"/> No Pref. |
| _____ | _____ | _____  | <input type="checkbox"/> Mon | <input type="checkbox"/> Tues <input type="checkbox"/> No Pref. |

Special needs/concerns/allergies: \_\_\_\_\_

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**Registration Fee:** \$60.00 per person or \$200.00 maximum per family

\*No fee required for Catholic School Students **but please submit a registration form.**

**Please note:** Money is never an exclusion to any of our programming. If for any reason you cannot pay the fee at this time, please just email me at [mjs@holyapostles.com](mailto:mjs@holyapostles.com).

Please return this form and payment to **the parish office by June 20<sup>th</sup>.**

\*No forms are accepted electronically.

**\*Classes begin**

**Monday, September 29<sup>th</sup> & Tuesday, September 30<sup>th</sup>.**