## 2025 - 2026

# St. Elizabeth Seton Religious Education

2025 - 2026 Registration Fees

One Child - \$275

Two Children - \$350
Three Children - \$ 400
4 or More Children - \$450
Sacramental Fees (in addition to Registration fee):
First Sacraments ( 2 <sup>nd</sup> Grade ) - \$125 Confirmation - \$150
Parental Participation
It is expected that every parent will volunteer time to help with the operation of our program. Please carefully consider and then check off which area you will help.
Catechist (Teacher) Classroom Aides
Substitute Hall Monitor Substitute Monitor Fundraiser help
We will need many Catechists and Aides in the classrooms and will not be able to accommodate
all requests without parent volunteers.
Parental Agreement for Religious Education Registration
As a Christian Parent in St. Elizabeth Seton Parish, we ask that you fulfill the following requirements:
Faithful attendance at weekly Mass.
Attendance at all religious ed classes and events.
Supervision of homework and review of materials.
Registration as a supporting member of our Parish using the church envelopes.
Parent Signature Date

### **Religious Education Registration**

520 Ridgebury Rd , Ridgefield, CT 06877

FAMILY INFORMATION	
Family Last Name:	Date:
Father's Name:	Father's Email Address:
Mother's Name:	Mother's Email Address:
Mother's Maiden:	Emergency Contact:
Home Phone:	Emergency Phone:
Home Address:	Fother Catholica
City, ST, Postal: ,	Father Religion:
Father's Cell / Work:	Mathan Cathalian
Mother's Cell / Work:	Mother Religion:
STUDENT #1 INFORMATION	
Child Name:	Catholic? Yes / No
Gender:	Sacrament Details Check & Date All Below
Birth Date:	Baptism:
Grade:	
Session:	Reconciliation:
Class:	Confirmation:
Special Needs (Medical, Learning Disa	ablilities, Physical Disabilities etc):
STUDENT #2 INFORMATION	
Child Name:	Catholic? Yes / No
Gender:	Sacrament Details Check & Date All Below
Birth Date:	☐ Baptism:
Grade:	Eucharist:
Session:	
Class:	Confirmation:
Special Needs (Medical, Learning Disa	ablilities, Physical Disabilities etc):

NOTE:If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

Tuition DUE: \$ \_\_\_\_\_\_ Tuition PAID: \$

\_\_ Signature:

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#### **Additional Students**

STUDENT #3 INFORMATION	
Child Name:	Yes / No
Gender:	Sacrament Details Check & Date All Below
Birth Date:	Baptism:
Grade:	Eucharist:
Session:	Reconciliation:
Class:	Confirmation:
<b>Special Needs</b> (Medical, Learning D	Disablilities, Physical Disabilities etc):
STUDENT #4 INFORMATION	
Child Name:	Catholic? Yes / No
Gender: Male Female	Sacrament Details Check & Date All Below
Birth Date:	Baptism:
Grade:	Eucharist:
Session:	Reconciliation:
Session:	Reconciliation:  Confirmation:
Session:  Class:  Special Needs (Medical, Learning D	Reconciliation:  Confirmation:
Session:  Class:  Special Needs (Medical, Learning D	Reconciliation:  Confirmation:
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION	Reconciliation:  Confirmation:
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION  Child Name:	Reconciliation: Confirmation: Disablilities, Physical Disabilities etc):
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION  Child Name:  Gender:  Male Female	Reconciliation: Confirmation: Disablilities, Physical Disabilities etc):  Catholic? Yes / No Sacrament Details Check & Date All Below
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION  Child Name:  Gender:  Male Female  Birth Date:	Reconciliation: Confirmation: Disablilities, Physical Disabilities etc):  Catholic? Yes / No Sacrament Details Check & Date All Below Baptism:
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION  Child Name:  Gender:  Gender:  Grade:  Grade:	Reconciliation:  Confirmation:  Disablilities, Physical Disabilities etc):  Catholic? Yes / No  Sacrament Details Check & Date All Below  Baptism:  Eucharist:
Session:  Class:  Special Needs (Medical, Learning Description)  STUDENT #5 INFORMATION  Child Name:  Gender:  Gender:  Grade:  Grade:	Reconciliation:  Confirmation: Disablilities, Physical Disabilities etc):  Catholic? Yes / No  Sacrament Details Check & Date All Below  Baptism: Eucharist: Reconciliation:

NOTE:If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

**Tuition DUE: \$** 

\_\_\_\_\_ Tuition PAID: \$

\_ Signature:

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