

2011-2012 Registration for Pre-Kindergarten (4 by Sept. 1, 2011) through Grade 9

(You may also register online at – www.sij.org)

✓Check One: RE-REGISTRATION NEW REGISTRATION

(**New Registration:** If your child was not baptized at St. Isaac Jogues, please include a copy of his/her baptismal certificate.)

Date _____ Family Name _____ Home Phone _____

Mailing Address: _____ City/State/Zip: _____

Father's
 First/Last Name _____
 Occupation _____
 Religion _____
 Work phone _____
 Cell _____
 Email _____

Mother's
 First/Birth Last Name _____
 Occupation _____
 Religion _____
 Work phone _____
 Cell phone _____
 Email _____

Child lives with: Both Parents Mother Father Shared Custody Other-please explain

Emergency Contact Person _____ Phone _____ Cell _____

PROGRAM CHOICES

* Indicate *A, *B, etc. in Program Choice Box below. *

*A - Sunday, 9:00-10:00 am (Gr. Pre-K-5)

*B – Sunday, 10:30-11:30 am (Gr. Pre-K-5)

*MS/HS – Sunday, 6:30-8:00 pm (Gr. 6-9)

*H = Home-Study Program (Gr. Pre-K-8, not Grade 9)

*2R/2E = Grade 2 First Reconciliation **and** First Eucharist Prep.

→→(IN ADDITION TO REGULAR GRADE 2)←←

Tuition Fees For Sessions

1 child \$ 60 (\$70 after July 31)
 2+ children \$100 (\$110 after July 31)
 (any grade combination Pre-K-9)

Home-Study Program Fees

1 child \$45 (\$55 after July 31)
 2 children \$ 60 (\$70 after July 31)
 3+ children \$ 75 (\$85 after July 31)

Gr. 2 Sacrament Fees

Reconciliation (fall) \$15
 Eucharist (spring) \$15

Child's Name First, Middle, Last if different than Family Last Name	School Grade in Sept. 2011	*Program Choice(s)	Date of Birth	Baptism Date and Church (Mark SIJ if done here)
1.				
2.				
3.				
4.				

Continued →

SACRAMENT CELEBRATIONS

IF NEW REGISTRATION: List dates and parish(es) where sacrament(s) were celebrated.

IF RE-REGISTERING: Check sacraments received.

NAME	1 st RECONCILIATION	1 st EUCHARIST	CONFIRMATION
1.			
2.			
3.			

PREVIOUS CATHOLIC SCHOOL or Faith Formation (religious education) if **not** at St. Isaac Jogues.

1. _____

2. _____

3. _____

SPECIAL NEEDS: medical, learning, and/or physical disabilities

WE LOVE OUR VOLUNTEERS!

Please check if you can be involved as:

___ Catechist

___ Sub. Catechist

___ Assistant

___ Sub. Assistant

___ Office Assistant

___ Music (guitar, keyboard, piano, singing)

THANK YOU!