Saint Clare of Montefalco

16231 Charlevoix, Grosse Pointe Park, MI 48230
313-647-5050 **www.stclarem.org**

Religious Education

2010-2011 ANNUAL FAMILY REGISTRATION

☐ Sunday Family Program (Gr. 1-8)
☐ Wed. Afternoon Program (Gr. 1-5)
☐ Wed. Evening Program (Gr. 6, 7 & 8)

Office Use Only

Date Received:

TUITION PAID:
1 child 180
2 285
3 + max 350

FAMILY NAME……

ADDRESS……..

CITY……ZIP CODE……TELEPHONE…….

NAME	**BIRTH DATE**	**ENTERING GRADE**	**SCHOOL**
Child:……			
Full Baptismal Name: Last First Middle	Nickname?……		
Child:……			
Full Baptismal Name: Last First Middle	Nickname?……		
Child:……			
Full Baptismal Name: Last First Middle	Nickname?……		
Child:……			
Full Baptismal Name: Last First Middle	Nickname?……		

PARENTS OR GUARDIANS: Mother Father

OCCUPATION(S):……..

WORK(W) / CELL(C) PHONE(S):……..

E-MAIL ADDRESS(ES):……

All contact from our office will be made through e-mail to reduce costs. Please write clearly & notify us when things change.

Please identify a relative, friend or neighbor who may be contacted in case parents cannot be reached:

Name: .....……Phone: .....….

Relationship: .....……..

Please identify any **special assistance** that your children may require and any **health problems** that we should be aware of:

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I GIVE MY PERMISSION TO St. Clare Religious Education to use photographs of my children, *without their names*, on their website or for other media and publications:

PARENT/GUARDIAN SIGNATURE _____ DATE _____