



Church • School • Preschool

Faith Formation Program Registration Form

Registration for: _____Preschool _____Elementary

Child's Name: _____ Sex: M F

Grade for the fall: _____ School: _____ Age: _____

Address: _____
Street City Zip

Home Phone: _____ Work Phone: _____ E-mail: _____

Date of Birth: _____

Who will be authorized to pick up your child? _____

Father's Name: _____ Religion _____

Mother's Name: _____ Religion _____

Anything else we need to know about your child: _____

Materials Fees: Scholarships available--contact: Jean DeLaney jean@saintclarechurch.org

Elementary Program: \$50.00 per child

Preschool Program: \$35.00 per child

Please make check payable to: St. Clare Church