

St. Katharine Drexel Religious Education, 4100 Mill Creek Rd. Haymarket, VA 20169

Phone: 540-687-6433 / Email: bmchugh@saint-stephen.org

**2019-20 FAMILY / STUDENT Registration**

Please note, we have a MANDATORY 2-year Sacramental Preparation Program. In order to receive their sacraments in 2<sup>nd</sup> & 8<sup>th</sup> grades, the child must have been enrolled in a Catholic Church RE program the PRIOR year. Please contact us directly if this is not the case in your child's situation.

**Tuition (Due at Time of Registration)**

**One child:** \$100      **Sacramental Year Fees:** 2<sup>nd</sup> Grade: \$50/8<sup>th</sup> Grade: \$75  
**Two children:** \$125      **LATE REG. FEE AFTER 08/12/19:** \$50  
**Three & more children:** \$150

**SACRAMENTAL PREPARATION CLASS:** If a child has **not** received the sacraments of **Baptism, First Reconciliation or First Holy Communion**, they will need to participate in a two-year Sacramental Preparation course and will not be in their grade-specific class. Traditional rates apply.

**Family Last Name:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone: \_\_\_\_\_

**MANDATORY** E-mail Address (will be used to send notifications): \_\_\_\_\_

Custodial Parent if different from below: \_\_\_\_\_

**First                  Middle                  Last                  Cell Phone                  Religion                  Maiden Name                  Living/Deceased**

Father: \_\_\_\_\_

Mother: \_\_\_\_\_

Child #1: \_\_\_\_\_  
**First                  Middle                  Last                  DOB                  Gender**

Allergies/Special Needs \_\_\_\_\_  
(medical, learning or physical disabilities)

Sacraments **NEEDED:** \*Baptism \_\_\_\_\_ Reconciliation & Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**RE Grade 2019/2020:** \_\_\_ Gd 1 \_\_\_ Gd2 \_\_\_ Gd3 \_\_\_ Gd 4 \_\_\_ Gd5 \_\_\_ Gd 6 \_\_\_ Gd 7 \_\_\_ Gd 8

**\*If your child is new to our program, please provide a copy of the Baptismal Certificate.**

**My child is 3<sup>rd</sup> grade or older and has not done:** \_\_\_ Baptism \_\_\_ Reconciliation \_\_\_ Communion

Child #2: \_\_\_\_\_  
**First                  Middle                  Last                  DOB                  Gender**

Allergies/Special Needs \_\_\_\_\_  
(medical, learning or physical disabilities)

Sacraments **NEEDED:** \*Baptism \_\_\_\_\_ Reconciliation & Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**RE Grade 2019/2020:** \_\_\_ Gd 1 \_\_\_ Gd2 \_\_\_ Gd3 \_\_\_ Gd 4 \_\_\_ Gd5 \_\_\_ Gd 6 \_\_\_ Gd 7 \_\_\_ Gd 8

**\*If your child is new to our program, please provide a copy of the Baptismal Certificate.**

**My child is 3<sup>rd</sup> grade or older and has not done:** \_\_\_ Baptism \_\_\_ Reconciliation \_\_\_ Communion

Child #3: \_\_\_\_\_  
**First Middle Last DOB Gender**

Allergies/Special Needs \_\_\_\_\_  
(medical, learning or physical disabilities)

Sacraments **NEEDED**: \*Baptism \_\_\_\_\_ Reconciliation & Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**RE Grade 2019/2020**: \_\_\_ Gd 1 \_\_\_ Gd2 \_\_\_ Gd3 \_\_\_ Gd 4 \_\_\_ Gd5 \_\_\_ Gd 6 \_\_\_ Gd 7 \_\_\_ Gd 8

**\*If your child is new to our program, please provide a copy of the Baptismal Certificate.**  
**My child is 3<sup>rd</sup> grade or older and has not done:** \_\_\_ Baptism \_\_\_ Reconciliation \_\_\_ Communion

Child #4: \_\_\_\_\_  
**First Middle Last DOB Gender**

Allergies/Special Needs \_\_\_\_\_  
(medical, learning or physical disabilities)

Sacraments **NEEDED**: \*Baptism \_\_\_\_\_ Reconciliation & Eucharist \_\_\_\_\_ Confirmation \_\_\_\_\_

**RE Grade 2019/2020**: \_\_\_ Gd 1 \_\_\_ Gd2 \_\_\_ Gd3 \_\_\_ Gd 4 \_\_\_ Gd5 \_\_\_ Gd 6 \_\_\_ Gd 7 \_\_\_ Gd 8

**\*If your child is new to our program, please provide a copy of the Baptismal Certificate.**  
**My child is 3<sup>rd</sup> grade or older and has not done:** \_\_\_ Baptism \_\_\_ Reconciliation \_\_\_ Communion

**CONSENT FOR RELEASE OF PERSONALLY IDENTIFIABLE INFORMATION**

The undersigned hereby consents to the release of photographs, videos, etc. of the above listed children to be used by the Diocese of Arlington and St. Stephen's for future promotional programs of the Diocese and Parish.

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_

**\*Youth Group Information\* (You will be contacted directly by our Youth Minister)**

1<sup>st</sup> Child's Name: \_\_\_\_\_ \_\_\_ Gd 9 \_\_\_ Gd 10 \_\_\_ Gd 11 \_\_\_ Gd12

2<sup>nd</sup> Child's Name: \_\_\_\_\_ \_\_\_ Gd 9 \_\_\_ Gd 10 \_\_\_ Gd 11 \_\_\_ Gd12

**ADDITIONAL NOTES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Office use only:**

Date Received: \_\_\_\_\_ Tuition Pd: \$ \_\_\_\_\_ FD \_\_\_\_\_ Cash \_\_\_\_\_ Check# \_\_\_\_\_

Tuition \_\_\_\_\_ 2<sup>nd</sup> Gd. fee \_\_\_\_\_ 8<sup>th</sup> Gd. fee \_\_\_\_\_