



# ST. ANTHONY OF PADUA CHURCH

## Office of Faith Formation

### Registration Grades 1 - 10

For Office use only	
Date Received	_____
Total Paid	_____
Online	_____
Check #	Cash _____

Family Name: \_\_\_\_\_

Parent(s)/Guardian(s) Names: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address (if different)

\_\_\_\_\_

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

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

<u>REGISTRATION FEE</u>	
<b>\$30 per child OR \$55 per family (except for Sacraments)</b> <b>\$50 per child (Grades 2, 9, &amp; 10/Sacrament classes)</b>	
<b>EXAMPLE</b>	
2 or more children (non-Sacrament)	\$55
2 children (1 Sacrament)	\$80
3 or more children (1 Sacrament)	\$105
3 children (2 Sacrament)	\$130
4 or more children (2 Sacrament)	\$155

**CHILDREN BEING REGISTERED**

NAME	DOB	GRADE	Sacraments Received		Sacraments Registration		Due	
			Baptism	1st. Sacraments	1st. Sacraments	Confirmation	Rel. Ed.	Sacrament Pgm.
<b>Sub totals</b>								
<b>TOTAL</b>								

Please provide information regarding food allergies or special needs: \_\_\_\_\_

\_\_\_\_\_

If **paying by check or cash**, please send a copy of this registration form with your payment. If registering and paying **online**: