K-6th GRADE REGINA TRI-PARISH RELIGIOUS EDUCATION PROGRAM REGISTRATION 2023-2024 2140 Rochester Ave. Iowa City, IA 52245 PHONE 351-7638

Family Name 1			Primary Phone	Primary Phone				
Mailing Address Zip			City					
Child/Children(s) Resides wi	th		Permission	to use child'	s photo on R eg	gina Religious Ed Fac	ebook page	
Father/Guardian Name Address			Marital statu	s	Email			
	Religio	on						
Mother/Guardian Name Address			Marital stat	18	Email			
Cell Phone	Religi	on						
	where your family is currentl	•						
EMERGENCY CONTACT (if we cannot reach you): Name				Rel	ationship	Prima	ary Phone	
<u>Child's Last Name</u> School	<u>Child's First Name</u>	GRADES KIN Gender Grad	DERGARTEN - SIXT de Birth Date	<u>H</u> <u>Baptism</u>	<u>Eucharist</u>	<u>Reconciliation</u>	Day	
			D					
*****	*****	*****	*****	*****	******	*****	** * * * * * *	
RELIGIOUS EDUCATION MINISTRY I am willing to help in the following way on Wednesdays, 6:30pm - 7:30pm: CATECHIST GRADE			(not to exc ENCLOSED	☐ IN PERSON (\$140 annually per student or \$80 per semester (not to exceed \$300 per family)				
SUBSTITUTE (where	e needed)					00		
We will carpool with			CASH					

On the reverse side, please note any physical, health, or learning condition of your child/children about which we ought to be aware of pertinent to your child/children's needs. The entire contents of this form remain confidential and are used only by department staff and your child/children's catechist(s).

Please print it off and fill it out. Mail to the address at the top of this page as soon as possible, along with the tuition payment. Thank you!