

St. John Vianney Parish Religious Education Program (PREP)
New Student Registration Form

DATE OF ENROLLMENT _____ SCHOOL _____ GRADE _____

LAST NAME FIRST NAME MIDDLE NAME SEX DATE OF BIRTH

HOME ADDRESS CITY STATE ZIP HOME PHONE NUMBER

NAME OF FATHER RELIGION OCCUPATION CHECK IF DECEASED

MOTHER'S MAIDEN NAME RELIGION OCCUPATION CHECK IF DECEASED

EMAIL _____

PERSON TO CONTACT IN CASE OF EMERGENCY/CLASS CANCELLATION EMERGENCY PHONE NUMBER

FAMILY BACKGROUND: MARRIED SEPARATED DIVORCED REMARRIED SINGLE PARENT

If child is transferring from another program, please list name of program and dates attended _____

RECEPTION OF SACRAMENTS

| <u>SACRAMENT</u> | <u>DATE</u> | <u>CHURCH</u> | <u>CITY AND STATE</u> |
|------------------|-------------|---------------|-----------------------|
| BAPTISM | _____ | _____ | _____ |
| PENANCE | _____ | _____ | _____ |
| EUCCHARIST | _____ | _____ | _____ |
| CONFIRMATION | _____ | _____ | _____ |

Tuition: One child \$100 Two children \$150 Three or more children \$200 Check # _____ Date _____