

# Our Lady of Guadalupe Religious Ed—*First Communion Year 1*

2021—2022 Registrations

1 child \$50 2 children \$70 3+ children \$100 *(No Refunds)*  
 (plus the cost of workbook \$—per child)  
 Late Registration—after September 30, 2021  
 \$60 / \$80 / \$110—plus the cost of the workbook *(No Refunds)*



## Office Use

Family ID: \_\_\_\_\_

A minimum payment of 50% of registration fee is required at registration.

Total Due: \_\_\_\_\_ Date Registered: \_\_\_\_\_

Payment: \_\_\_\_\_ Cash \_\_\_\_\_ Credit \_\_\_\_\_ Check # \_\_\_\_\_

Balance: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

### Payment Plan (Must be paid in full by January 2022)

Month	Amount	Receipt #
_____	_____	_____
_____	_____	_____
_____	_____	_____

I agree to pay Our Lady of Guadalupe Religious Education Program accordingly.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Session II

**Sunday 11:15—12:30** 1st 2nd  
 \_\_\_First Communion: *(Year 1) Students in Religious Education Classes preparing for first year of Communion preparation classes.*

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

Father \_\_\_\_\_ Mother \_\_\_\_\_

Child lives with: Both parents \_\_\_ Mother \_\_\_ Father \_\_\_ Other \_\_\_

Other: \_\_\_\_\_

\*\* Other \*\* Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Child \_\_\_\_\_  
Last Name First Name

Date of Birth \_\_\_\_\_ Age: \_\_\_\_\_ Grade in School 2021-2022 \_\_\_\_\_

### Religious Education History:

Did child attend Religious Education classes **last year** at Our Lady of Guadalupe Church? Yes \_\_\_ No \_\_\_

*\*\*\*If child attended Religious Education **at another church last year** a "Letter of Attendance Verification" signed by the Director of Religious Education is required.*

### Required Documentation:

### Date Received:

State/City Birth Certificate (Copy): \_\_\_\_\_

Baptismal Certificate (Copy): \_\_\_\_\_

Letter of Attendance (Original): \_\_\_\_\_

**\*\*\*Required when transferring from a different Parish**

Does the child have special needs? \_\_\_\_\_

### Photo Permission:

I, the parent/legal guardian of: \_\_\_\_\_, hereby give permission for photographs to be taken of my child and used by Religious Education Program for publication in Church newsletters, brochures, websites, news reports and promotion of this and/or similar kinds of events. These images will not be manipulated or used in any public venue, besides that stated, without further permission.

Date: \_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_