

**CCD REGISTRATION FORM
Grades 1-8**

Parent's/Guardian's name _____
Phone _____ (home) _____ (work) _____ (cell)
Address _____
City _____
Parent email address _____
Please note if you do not wish to receive email notices _____

If your child was **NOT** baptized at St. Joseph's, and if you have not already given us a copy of their baptismal certificate, we **need to have a copy of your child's baptismal certificate** for our parish records. A photocopy is acceptable.

Grades 1 – 8 Fees: First child \$100.00 and \$85.00 each additional child. Must be paid at time of registration or make arrangements with the Director of CCD.

Child's Name _____ Date of Birth _____ Fee: \$100.00
Public School Attending _____ Grade ___ M ___ F ___
Date of Baptism _____ Parish of Baptism _____ City of Baptism _____
1st Reconciliation/1st Communion ___ Yes ___ No

Child's Name _____ Date of Birth _____ Fee: \$85.00
Public School Attending _____ Grade ___ M ___ F ___
Date of Baptism _____ Parish of Baptism _____ City of Baptism _____
1st Reconciliation/1st Communion ___ Yes ___ No

Child's Name _____ Date of Birth _____ Fee: \$85.00
Public School Attending _____ Grade ___ M ___ F ___
Date of Baptism _____ Parish of Baptism _____ City of Baptism _____
1st Reconciliation/1st Communion ___ Yes ___ No

Parent signature _____
07-01-2017

Fee Total: _____