Chack #			
	Check #		

## Grade 2023-2024\_\_\_\_\_

2<sup>nd</sup> -\$35, 10<sup>th</sup> - \$60, 11<sup>th</sup>-\$70 All other grades - \$30

## Maria Immacolata Religious Education Registration

246 Corporate Dr., Houma, Louisiana, LA 70360 (Please Print)

Student Name:				
Age:	Birthdate:	Gender:		
	Date	Church	City/State	
	nild was baptized at another Cl	• • •	h a copy of the baptismal certificate.)	
riist reliance				
First Eucharist:_				
Medical conditi	ons/Food Allergies:			
Home Address:				
		Family Information		
Family Last Nan	ne:			
Father's Name:				
Mother's Name	:			
	(first)	(Maiden) (Last)Father's Cell:		
Primary Phone:				
Emergency Con	tact:			
	(telephone #)	(name)		
(All corre	spondence will be via email.)			
Guardian, if diff	ferent from above:			
Guardian Addre	ess:			
	child to participate in all CCD of the CRD o		a Immacolata Catholic Church including the lis age appropriate.	
Parent Signature				