## St. Rita Religious Ed — 2023 - 2024 Registration Form

Please check one:				
Registered Parishioners	s at St. Rita			
Non-Parishioners regist	tered at:			
Father: Last, First, Middle	Name			
Mother: Last, First, Middle	Name			Maiden Name
Home Address		City	//State	Zip
Father's Cell		Mother's Ce	II	Home Phone
Primary Email				
Secondary Email				
Emergency Contact Name a	and Phone #			
During Class Time Custodial (	Care Is With (P	Lease Check One	<del>)</del> ):	
Both Parents M	•		•	
				Number
	T			
Child's Name	School Grade	School Attending	Please check any Sacraments your child <u>HAS</u> received	Special Needs  (Medical Learning Rehavior Allergies)

Child's Name First & Last	School Grade 2023 - 2024	School Attending	Please check an your child <u>HA</u>		Special Needs
FIIST & Last			Baptism   Eucharis	t   Confirmation	(Medical, Learning, Behavior, Allergies)
			I	1	

- Students must have a registration or rollover form on file with the Religious Education Office in order to attend St. Rita Religious Education Classes/events.
- Tuition and Sacrament fees may be paid in full with registration, or may be paid in installments. A billing statement will be sent to families with an outstanding balance. Paid tuition is non-refundable after the first day of attendance.
- Tuition assistance will be available to parishioners who exhibit financial need. An application for financial assistance must be presented to the Director of Religious Education. No family is turned away because of an inability to pay. The program will not provide tuition assistance to non-parishioners.

## St. Rita Religious Education Class Times

Preschool (ages 3 and 4): 1st & 3rd Sundays during 10:30 AM Mass

K-8<sup>th</sup> Grades: Wednesday Evenings 6:15 PM - 7:15 PM 9<sup>th</sup>-11<sup>th</sup> Grades: 1<sup>st</sup> & 3<sup>rd</sup> Sunday Evenings 6:00 PM - 7:30 PM

before or on August 31st

\$25

after August 31st

\$50

**Tuition Rates** 

Preschool Ages 3 and 4

	ary School K-5th Grades							
	ary ochoor it-o- oraces			\$80	)	\$105	5	
Middle S	School 6th-8th Grades			\$90	)	\$115	5	
High School 9th-11th Grades			\$110		\$135	5		
Sacrament F	ees (in addition to tuition	<u>n)</u>						
Firs	t Reconciliation & First Euc (Only fee for St. Rita 2		chool Students	\$80	)	\$80		
Confirmation (Only fee for St. Catherine HS Students)				\$140		\$140		
Non-Parishio	oners Rate: Please add §	25 to the to	otal.		Plea	se make checks payab	ole to <u>St. Rita Parish</u> .	
Student's	First, Middle,& Last Name	Gender	Birth Date	RE Grade	Tuition Rate	Sacrament Fee (if applicable)	Total	
		I			Non-Parishio	ner Rate (if applicable)		
						GRAND TOTAL		
IF Sacrame	nt needed: If your child y	vas NOT b	aptized at St. F	Rita Parish.	a copy of the b	L	QUIRED.	
	nt needed: If your child v	·	•		a copy of the <u>b</u>	L	QUIRED.	
	nt needed: If your child v	·	•			aptism certificate is RE	<u>QUIRED</u> . & State	
Date of Bapti	In the event that I ca to contact the be	Place of Physics Physi	sician Conse	Name of Ch ent - Emeror rrangements if necessary,	urch gency Contac , I hereby give m transport my chi	aptism certificate is RE  City 8  2t  y consent to St. Rita Pari ld to a clinic or hospital.	& State	
Date of Bapti	smIn the event that I ca	Place of Physics Physi	sician Conse ched to make a physician and,	Name of Chent - Emeror rrangements if necessary, nysician's Ph	urch  gency Contac  I hereby give m transport my chi one Number:	aptism certificate is RE  City 8  2t  y consent to St. Rita Pari ld to a clinic or hospital.	& State	
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Physician's	In the event that I can to contact the best selected as Name:  YES - my child's/children's process of the selected as No my child's/children's process of the selected as No.	Physe annot be readelow named obotograph mand/or sacra	sician Consected to make a physician and,  Photog may be used in pay NOT be used  Paym ment fees for out	Name of Chart - Emeror rrangements if necessary, nysician's Phoraphy Con parish bulletind.	gency Contact I hereby give metransport my chicone Number:  sent ns, website, socialent en to attend the contact  Date:  Date:	aptism certificate is RE  City 8  Lact  City 8  Output  City 8  City 8	S State ish	