

Family Name _____ e-mail: _____ Date _____

Street Address _____ Home Phone: _____ Cell Phone: _____

Mailing Address (if different from above) _____ Town _____ Zip _____

Paid: ___ Cash ___ Ck# ___

Sacraments received: Answer “Yes” or “No”

(IF SACRAMENT WAS NOT RECEIVED AT STAR OF THE SEA, CERTIFICATE FROM THE CHURCH MUST ACCOMPANY THIS FORM.)

								<u>FEE SCHEDULE</u>
ELEMENTARY Pre-K-GR. 5	Allergies/ Special Needs	Male/ Female	Grade: Sept 2016	Prefer A or B week Sunday morning	Baptism Yes/No	First Comm Yes/No	First Penance Yes/No	Elementary:
First and last Name if different from above:								\$180.00 1 CHILD
								\$200.00 2 CHILDREN
								\$210.00 FAMILY OF 3 OR MORE
								Pre-K/K 50.00 per child if no other siblings
								*If unable to submit fee at time of registration, form may be returned by due date without penalty of late fee.
MIDDLE GR. 6-8	Allergies/ Special Needs	Male/ Female	Grade: Sept 2016	Prefer A or B week Sunday evening	Baptism Yes/No	First Comm Yes/No	First Penance Yes/No	<input type="checkbox"/>
First and last name if different from above:								Please check the box if you would like to be on a payment plan.

DEADLINE FOR REGISTRATIONS:
6/30/16
* \$40.00 LATE FEE AFTER 6/30/16

If you're making a Sacrament please write how you would like the name on the Certificate:

Father's Name: Occupation:	Mother's First Name: Maiden Name:	Occupation:
Father's Address (if different from above)	Mother's Address (if different from above)	
*If child lives with other than both parents, please indicate :	Name: Phone: Address:	Relationship:

REGISTRATION 2016/2017

OUR LADY STAR OF THE SEA RELIGIOUS EDUCATION, PO Box 337, Lake Hopatcong, NJ 07849

Family Name _____ e-mail: _____ Date _____

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Mailing Address (if different from above) _____ Town _____ Zip _____

Paid: ___ Cash ___ Ck# ___

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HIGH SCHOOL GR. 9-10 First and Last Name if different from above:	Allergies/ Special Needs	Male/ Female	Grade: Sept 2016	Name of High School	Baptism Yes/No	First Comm Yes/No	First Penance Yes/No	Confirmation Yes/No	High School: \$90.00 PER CHILD
									All 9 th and 10 th grade classes are scheduled for
									A-Week Sunday Evening

Father's Name: Occupation:	Mother's First Name: Maiden Name:	Occupation:
Father's Address (if different from above)	Mother' Address (if different from above)	
*If child lives with other than both parents, please indicate :	Name: Phone: Address:	Relationship:

PLEASE PRINT CLEARLY
See Other Side for Pre-K to 8th