ST. MARK CHURCH RELIGIOUS EDUCATION REGISTRATION FORM

Please <u>print</u> legibly.		School Year: 20 ₋	/20
Family Last Name		Date	
Mother's Name			
Father's Name			
Address			
City		Code	
E-mail (more than one, if	necessary)		
We will use e-mail as a pri	mary form of commun	ication.	
Mother's Cell Phone	()	-	
Father's Cell Phone	()	-	
Home Phone	()	-	
Registered Parishione	r of St. Mark Churc	h? YES/NO	
****Please attach copies program.****	of your child's <mark>baptis</mark>	<mark>smal certificates</mark> if you	u are new to the
Student Name	Date of Birth	Grade Level	
			
Please mail or drop off for	m and payment ASAP	to:	

St. Mark Religious Education Office 300 E. Cole Ave. Wheaton, IL 60187

Tuition: (please circle)

1 student in family	\$120
---------------------	-------

2 students in family \$135

3 or more students in family \$150

Additional Fees, per student: (please circle)

First Holy Eucharist (Grade 2) \$ 15

Confirmation (Grades 7+) \$ 25

Non-parish-member fee per family \$50

Your total: \$

Cash/checks accepted. If you prefer to pay in cash, <u>please return this form now</u>, then pay in cash on the first day of class. Please see R.E. Program Calendar on WEB page.

Please make checks payable to: St. Mark Church

No one will be denied religious education for financial hardship reasons. Payment arrangements can be made through the Religious Education Office.

Please email or call the office with any questions or concerns about this form:

Christine Olsen, Program Coordinator re@stmarkwheaton.org 630.668.4614