

****Please return this packet no later than July 16, 2020**

****ONE FORM PER KINDERGARTEN STUDENT****

FAMILY INFORMATION

Parent Names (Mom) _____ (Dad) _____ FIRST/LAST

Circle One Married Divorced Separated Widowed Married Divorced Separated Widowed

Mother's Maiden Name _____ Home Phone # _____

Mother's Address _____ Cell # _____

Mother's Email Address _____

Father's Address _____ Cell # _____

Father's Email Address _____

STUDENT INFORMATION

Student's Name _____ Grade in 2021-2022 **K** Date of Birth ___/___/___ M F

Church of Baptism _____ Lives With ___ MOM ___ DAD ___ Guardian (Name _____)

Allergies _____

Physical, emotional or special learning needs _____

NOTICE: If you need to add more children, please complete a separate registration form.

I/We agree to the following:

*The above child(ren) are free of any contagious diseases, and are in good physical condition, and able to participate in regular activities. Signing this registration form indicates that the above named students and their parents/guardians will adhere to the policies of this CCD program.

*Our family has read the CCD Family Handbook and understand the contents included.

*We understand that parents (guardians) are the primary catechists and the CCD program is to assist in living out the faith at home.

→ **Parent/Guardian Signature** _____ **Date** _____

****ONE Archdiocese of Cincinnati Permission, Release & Medical Power of Attorney Form must be completed for each student****

2021-2022 St. John the Baptist Tuition Rates - Grade K

\$50.00 Per Kindergarten Student

OFFICE OF RELIGIOUS EDUCATION USE ONLY

Tuition Owed \$_____ Tuition Paid \$_____ CASH CHECK #_____
_____Medical Forms Received _____Volunteer Form Received