

Called to Faith 2011-2012

St. Anthony the Hermit Parish Office of Christian Formation

N74 W13604 Appleton Avenue
Menomonee Falls, WI 53051
(262) 251-5910, press 7, then 24

This Registration Form is due by July 15, 2011 for all programs

A minimum payment of \$25 must be submitted with Registration Form for each child (See page 2 for payment plans that are available)

Father's Name

PLEASE PRINT

Last Name/First Name Occupation Religion Daytime Phone Number

Address

Street City/Village State/Zip Code Evening Phone Number

E-mail Address

_____ (Will only be used for communications from the Parish Office)

Mother's Name

Last Name/First Name Occupation Religion Daytime Phone Number

Address

(If different from above)

Street City/Village State/Zip Code Evening Phone Number

E-mail Address

_____ (Will only be used for communications from the Parish Office)

With whom does the student reside? Father Mother Both Other, please explain _____

PLEASE NOTE: Families MUST be registered, contributing members of St. Anthony's parish in order to participate in the Religious Education programs. Our family is registered in the parish. Yes No

- Please complete the Student Information on page 2 of this form -

Student Information — Please fill out completely

PLEASE LIST YOUR CHILD(REN) IN THE ORDER OF OLDEST TO YOUNGEST:

STUDENT NAME List <u>Oldest</u> first	GRADE (in Fall)	BIRTHDATE (Include Year)	Male/ Female	PROGRAM NAME (Please see program descriptions)	TUITION	ADDITIONAL FEES	TOTAL
TOTAL						\$	

Please list any information regarding special needs _____

NOTE: You must return the completed Pledge/Volunteer Form and signed Parent/Student Handbook Acknowledgement Form with this Registration Form

TUITION INFORMATION:

Tuition fees are in addition to your Parish Financial contribution
 Make all checks payable to: St. Anthony Christian Formation

TUITION FEES ARE DUE BY SEPTEMBER 30, 2010 - UNLESS A PAYMENT PLAN IS CHOSEN

- I would like a **Payment Plan** (*Choose one*):
 - Four-payment plan (September, November, January, March)
 - Two-payment plan (September, January)
 - Scrip (apply my credit earned from last year)
- I have 3 or more children enrolled in the program. I would like the family tuition discount (\$250 maximum tuition payment). Discount does not apply to fees.

OFFICE USE ONLY	
Check Number: _____	Date Received: _____
Check Amount: _____	Balance Due: _____