



# REGISTRATION

RELIGIOUS EDUCATION • 2017-18

Drop off or mail to: Parish Office, 27528 Patrick Street,  
Madison Lake, MN 56063

I AM A **REGISTERED MEMBER** OF:  IMMACULATE CONCEPTION OF *Marysburg*  
 CHURCH OF THE *Nativity*

If you are not currently a registered member of either church, please contact the Parish office at 507-243-3166.

Father's Full Name: *Please Print* \_\_\_\_\_

Mother's Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, ST and ZIP: \_\_\_\_\_

Primary Phone \_\_\_\_\_ Secondary Phone \_\_\_\_\_

Primary EMAIL: \_\_\_\_\_ Emergency Contact: \_\_\_\_\_

PLEASE LIST THE CHILDREN YOUR ARE REGISTERING, AND CHECK THE SACRAMENTS RECEIVED TO DATE:

NAME ( <i>Last name if different from parent/s</i> )	BIRTHDAY	GRADE	BAPTISM (LOCATION)	1ST COMMUNION (LOCATION)
1.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Please note any special concerns that will help us help your child: (i.e. allergies, medications, disabilities, etc.)

Please indicate if you would be willing to help our program (Teacher, substitute, special projects, occasional snacks, etc.)

<p>REGISTERED PARISHIONER COSTS PER STUDENT:</p> <p>All Grades: \$25 ea. _____</p> <p>Family Max: \$60 ea. _____</p> <p>Total \$ _____</p>	<p><i>These fees help cover the cost of books and supplies. However, no family will be denied participation because of financial concerns. If you would like to discuss a fee waiver, or if you have more than 4 children enrolled, please contact us.</i></p>
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Enclosed: \$ \_\_\_\_\_ Date \_\_\_\_\_

Signature: \_\_\_\_\_

We may post photos on the church wesites. Please let us know if this is acceptable to you by checking and signing below:

Yes, I give my permission to post images of my child(ren).

No , I do not want pictures of my child(ren) posted on the church website.

Signature of Parent or Guardian \_\_\_\_\_ Dated \_\_\_\_\_