

Parish Religious Education Program Registration

St. Ann Parish

502 S. Main Street, Phoenixville

youthstann@comcast.net 610-755-1077

Complete form. Please print. For first time registration, please provide a copy of each child's Baptismal Certificate if not baptized at St. Ann's.

** New—Please indicate which session of PREP you prefer for each child: Sunday morning from 10:45-12:05 or Tuesday evening from 6:25-7:45.*

Child's Name (First & Last)	M/F	Date of Birth	PREP Grade 2011/12 (K-6th)	School Attending 2011/2012 and Grade	Baptism Date & Parish	1st Penance Date	1st Communion Date	Session Choice Sunday or Tuesday

Family Name _____ **Home Phone #** _____

E-Mail Address _____

Address _____

Street

City

Zip Code

Child(ren) lives with (both parents, father, mother, guardian, other) _____

Father's Name _____ **Cell Phone #** _____ **Religion** _____

Mother's Name _____ **Cell Phone #** _____ **Religion** _____

Step-Parent's Name (M-F) _____ **Cell Phone #** _____ **Religion** _____

For Office Use Family Name: _____ Fee _____ Check# _____ Date _____
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Family Name

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EMERGENCY CONTACT INFORMATION:

During class time, if we are unable to reach you, whom should we contact?

Name: _____ Relationship: _____ Phone Number: _____
Cell Number _____

MEDICAL/LEARNING DATA

Please indicate any specific concerns our PREP staff should be aware of for your child:

Child's Name	Medical Conditions/Allergies	Prescribed Medications	Physical/Learning Support Services	Individualized Education Program IEP
				◇ YES ◇ NO
				◇ YES ◇ NO
				◇ YES ◇ NO

Please read the following and check all boxes that apply:

- I am a member of St. Ann's Parish. If not, please indicate your Parish _____
- I give permission for my child's picture to appear on St. Ann's website, bulletin boards and other Parish material.
- My child has my permission to walk between Holy Family School and St. Ann Church or Chapel accompanied by a member of the PREP staff.
- I give permission for my child to receive emergency medical care for injuries that should occur while participating in PREP.
- Please check box if there are custodial legal issues regarding any child listed above.

Name of person responsible for Religious Education if not Parent/Guardian _____ Relationship _____

*Please provide a notarized letter signed by a parent/guardian which gives permission and names this person as the one responsible for the child's religious education.

Parent Signature _____ Date _____

Tuition:

If received before 7/1/11 First Child \$85.00 Two Children \$140.00 Three or more \$170.00

If received after 7/1/11 First Child \$100.00 Two Children \$170.00 Three or more \$200.00

Please make check payable to St. Ann Parish