

FAMILY FAITH SUNDAYS - CCD PROGRAM

REGISTRATION FORM FOR 2018

GRADES 1ST, 3RD, 4TH 5TH

Please return this form signed and dated with registration fee

CHURCH PARISH (circle one): St. Mary Magdalen Other _____

PARENTS (M/M, Mr., Mrs., Ms.):

Email Address: _____ CELL PHONE _____

MAILING ADDRESS (street, city, zip):

NAMES OF CHILDREN IN CCD PROGRAM:

CCD GRADE

SCHOOL:

(School Grade Fall 2018)

- | | | |
|----------|-------|-------|
| 1. _____ | _____ | _____ |
| 2. _____ | _____ | _____ |
| 3. _____ | _____ | _____ |
| 4. _____ | _____ | _____ |

Parent's Signature: _____

Date: _____

Classes will be held at St. Mary Magdalen Parish Office (Ministries Bldg.)

Registration fee

\$20 book fee per child

This form is for grades 1st, 3rd 4th and 5th.

**** First Communion (2nd Grade), Jr. High and High School Life Teen
will have a separate registration form, available at Church.**

For Office Use:

FORM RECEIVED BY: _____

FEE PD: _____ CASH (or) _____ CHECK