



# The Church of the Blessed Sacrament

10 Diamond St., Walpole, MA 02081 – 508-668-4700, Fax: 508-668-3554

Family Name \_\_\_\_\_  
Parent First Names \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_  
Home Email: \_\_\_\_\_  
Mom's Cell Phone: \_\_\_\_\_  
Dad's Cell Phone \_\_\_\_\_  
Mom's Work Phone: \_\_\_\_\_  
Dad's Work Phone: \_\_\_\_\_  
In an Emergency which phone should we call first?  
\_\_\_\_\_

Other Custodial Parent and address, if different:  
\_\_\_\_\_  
\_\_\_\_\_

## 2011-2012 Religious Education Registration Grades 1 to 8

1) Fill in the family information above.

2) Fill in the student information below.

When you register children for the first time, if they were not baptized at Blessed Sacrament, you need to supply a copy of the baptismal record.  
Baptized at: \_\_\_\_ Blessed Sacrament \_\_\_\_ Other Parish (Request a Baptismal Certificate from them if you don't already have a copy.)

3) Choose a day and time for each child's class.

Class Choices: \_\_\_\_\_

### Grades 1 to 5:

Sunday, 10:15 to 11:15 am      Monday, 5:30 to 6:30pm  
Monday, 4 to 5pm                      Tuesday, 5 to 6pm

### Grades 6 to 8:

Monday, 6:45 to 7:45pm;  
Tuesday, 6:15 to 7:15pm

4) Return the completed registration to the parish house no later than Tuesday, September 6, 2011.

## Fees

• **Standard fee: \$100 per child through September 6. \$125 after September 6.**

Maximum fee of \$300 per family. However, no child will be turned away because of the cost of fees. If this fee is a burden, call Bill Dittrich, 508-668-4700 or email [bdittrich@blessedsacrament.org](mailto:bdittrich@blessedsacrament.org). Students in the Confirmation program are separate from this.

• **Reduced fee: \$50 per child for families giving \$500 or more annually to the parish. \$62.50 after Sept. 6**

To receive the reduced fee, a family must have verifiable contributions and sign the following statement:

*Our family gave \$500.00 in contributions to Blessed Sacrament Parish during the past year. We qualify to receive half off the Religious Education fees.* \_\_\_\_\_ Parent Signature

• **Parents who teach in the program receive credit for one child's fee for each class taught.**

Child's Name                                      Age                                      Birth date                                      Gender                                      Grade                                      Day School

Preferred Class Day/Time : First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

Special Needs: medical, learning disabilities, physical disabilities: \_\_\_\_\_

Child's Name                                      Age                                      Birth date                                      Gender                                      Grade                                      Day School

Preferred Class Day/Time : First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

Special Needs: medical, learning disabilities, physical disabilities: \_\_\_\_\_

Child's Name                                      Age                                      Birth date                                      Gender                                      Grade                                      Day School

Preferred Class Day/Time : First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

Special Needs: medical, learning disabilities, physical disabilities: \_\_\_\_\_

Office Use - Tuition due: \$ \_\_\_\_\_ Tuition Pd: \$ \_\_\_\_\_ Initials: \_\_\_\_\_