TRANSFER STUDENT

St. Philip Neri Religious Education Registration 2026-2027

Family Name _____ Date _____

Student's Name	Birth Date	Baptized Yes/No	Comm. Yes/No	Grade in Sept. 2026	School in Sept. 2026

Classes every week

Grade 2 – Mon. 5:00-6:00
Grade 3 – Tues. 5:00-6:00
Grade 4 – Wed. 5:00-6:00
Grade 5 – Tues. 5:00-6:00
Grade 6 – Wed. 5:00-6:00
Grade 7 – Mon. 6:30-7:30
Grade 8 – Mon. 6:30-7:30

Student's Previous Religious Education (ie. grades attended) _____

Name of Previous Parish _____

Baptismal Certificate and written proof of Rel. Ed. from previous parish ie; Letter of Transfer must accompany this form

Emergency Contact- NOT PARENT: (this contact is used when parent can't be reached)

Name _____ Relationship _____ Phone _____

Any medical issues or special circumstances that your child has that would be helpful to know:

_____

Father's Name _____ Phone _____

Mother's Maiden Name _____ Phone _____
Last Name, First Name

Home Address _____
Street City, State Zip

Primary Phone _____ E-mail address _____

Family Status: Married ___ Single ___ Widowed ___ Separated ___ Divorced ___ Custodial Parent ___

Registered in Parish Yes ___ No ___ Parish Envelope # _____

Picture Release - When we have special events, we sometimes take photographs and put them in our Bulletin, on our website, the diocesan website or display them outside the Faith Formation office.

_____ **I give permission** for my child to be photographed and to have that photograph posted in the Bulletin, on the
Yes or No parish or diocesan website or publicly displayed. Please Initial: _____

Tuition: 1 child: $225.00 2 children: $335.00 3 or more children: $400.00

Sacramental Fees: 2nd Grade - Communion Fee: $100.00 8th Grade - Confirmation Fee: $150.00

Please make check payable to: St. Philip Neri $ _____ accompanies this registration form.

Credit Card Information

Name on Credit Card: _____

Credit Card Number: _____

EXPIRATION DATE : _____ CVV Security Code: _____

Billing Address: Zip Code: _____ Street Number: _____

Cardholder's Signature: _____

For Office Use Only

Date _____ Amt. Paid _____ Check # _____ Credit: Batch _____

Baptism Certificate Received _____ Letter of Transfer Received _____