

OUR LADY QUEEN OF PEACE  
RELIGIOUS EDUCATION PROGRAM  
209 US Highway 206  
Branchville, NJ 07826  
(973)948-3185  
Email: [reled@olqpbranchville.org](mailto:reled@olqpbranchville.org)  
FATHER ED RAMA, PASTOR

**OLQP RELIGIOUS EDUCATION 2019-2020**  
**MAIL-IN REGISTRATION FORM**

Mail-In Registrations are now being accepted for Our Lady Queen of Peace Religious Education Program 2019-2020. All returning students, as well as new students, must complete a registration form, no student is automatically re-registered.

Kindly provide the information requested on page 2, and return the completed form to the Religious Education office. The office is open weekdays from 9am-2pm, or you may choose to mail the completed form back to me at the address shown above.

Fee Schedule for students in Grades 1-10:

- \$100.00 for one child;
- \$125.00 for two children;
- \$150 for three or more children;
- For students in Grade 2 there is an additional fee of \$20.00 for the First Eucharist Retreat.
- For students in Grades 7, 8, 9 and 10 there is an additional fee of \$30.00 for the Confirmation Retreat.

***Payment is due with your completed form. Please make all checks payable to OUR LADY QUEEN OF PEACE. Thank you!***

God bless you,  
Mrs. Diana Rimshnick, CRE  
Coordinator of Religious Education

***NOTE: For all new students (first time registrants) copies of a Birth certificate and Baptismal Certificate must also be submitted to the CRE at the time of registration, thank you.***

Tuition DUE: \$ \_\_\_\_\_ Tuition PAID: \$ \_\_\_\_\_ Check # \_\_\_\_\_

Parental Signature: \_\_\_\_\_ Date \_\_\_\_\_

**FAMILY INFORMATION: PLEASE PRINT**

PARENT/GUARDIAN NAME/S:
MAILING ADDRESS:
HOME AND CELLPHONE NUMBERS:
EMAIL ADDRESSES:
EMERGENCY CONTACT NAME AND PHONE NUMBER: RELATIONSHIP (grandparent, friend, etc.):
<b>PHOTO RELEASE STATEMENT (REQUIRED)</b> I give permission for Our Lady Queen of Peace to use my child/children's photograph for 2018-2019 in publications deemed relevant by the Pastor (i.e. Parish Bulletin, Website, Promotional material for the Parish)      Yes      No

**STUDENT #1                      NEW STUDENT? (YES/NO)**

STUDENT NAME:	GRADE IN SEPTEMBER:
BIRTHDAY:	SCHOOL IN SEPTEMBER:
AGE:	LEARNING/MEDICAL NEEDS:

**STUDENT #2                      NEW STUDENT? (YES/NO)**

STUDENT NAME:	GRADE IN SEPTEMBER:
BIRTHDAY:	SCHOOL IN SEPTEMBER:
AGE:	LEARNING/MEDICAL NEEDS:

**STUDENT #3                      NEW STUDENT? (YES/NO)**

STUDENT NAME:	GRADE IN SEPTEMBER:
BIRTHDAY:	SCHOOL IN SEPTEMBER:
AGE:	LEARNING/MEDICAL NEEDS:

**STUDENT #4                      NEW STUDENT? (YES/NO)**

STUDENT NAME:	GRADE IN SEPTEMBER:
BIRTHDAY:	SCHOOL IN SEPTEMBER:
AGE:	LEARNING/MEDICAL NEEDS: