

Church of The Epiphany Religious Education Program
239 East 21 Street - New York, NY 10010
212-475-1966 ext.: 113

REGISTRATION FORM for GRADES 1- 7
2019-2020

Student Name _____ Date of Birth _____ Registration for Grade _____

Address _____ Apt# _____ Zip Code _____

Home Telephone# _____ Email Address (Parent) _____

Public/Private School Student attends _____

Is the Student a baptized Roman Catholic? Yes _____ No _____

*** Please note: A copy of the Baptism Certificate must be attached to this registration form.**

Did the student receive First Holy Communion? Yes _____ No _____ Date Received _____

Required information: Our Family is registered in The Epiphany Parish. _____

Our Family is not registered in a Parish. _____

Our Family is registered in the Parish of _____.

Parent Information:

Mother's Name _____ Father's Name _____

Religion _____ Religion _____

Cell Phone # _____ Cell Phone # _____

Occupation _____ Occupation _____

Business Phone # _____ Business Phone # _____

Name & cell # of caregiver who will pick-up your child: _____

Permission for your child to go home alone: Please sign _____

Does the student have any medical or physical disabilities? (Allergies- IEP etc.) Yes _____ No _____

Please explain _____

EMERGENCY CONTACT PERSON If Parent is Unavailable

Name _____ Relationship _____

Day Telephone # _____ Cell Phone# _____

Tuition: \$300 is due at registration.

Sacramental Fee for First Communion or Confirmation: \$325 is due November 15, 2019.

Payment Plans are available upon request.

Please make checks payable to Church of The Epiphany