

ST. ELIZABETH ANN SETON - OFFICE OF RELIGIOUS EDUCATION

2021-2022 REGISTRATION FORM

1835 Larkvane Rd., Rowland Heights, CA 91748

Phone: 626-965-5792 Fax: 626-913-0580

FORM 1/2

Updated 2021

PLEASE PRINT ALL INFORMATION CLEARLY

Language spoken at home (Please Check One): English ___ Spanish ___ Today's Date: ___/___/___

Parent/s/Legal Guardian/s Marital Status (Please Check One):

Single ___ Divorced ___ Separated ___ Civil Marriage ___ Church Marriage ___.

Family Last Name: _____

Father's name _____ Religion _____

Mother's name _____ Religion _____

Legal Guardian's name _____ Religion _____

(Proof of legal guardianship will be required)

Address _____ Apt/Space/Unit: _____

City _____ Zip _____

Home Phone: _____ (Father's cell) _____ (Mother's cell) _____

Father's Email address (print clearly) _____

Mother's Email address (print clearly) _____

Parent/s/Legal Guardian Information: (Please Check all that apply) : **Key: (M)= Mother (F)= Father**

Baptism (M)___ (F)___ First Communion (M)___ (F)___

Confirmation (M)___ (F)___ Married in the Catholic Church? Yes ___ No ___

CHILD(REN)'S INFORMATION

Name(s): Last, First	Birth Date	Gender (M, F)	School Grade 2021-2022	Date of Baptism OR RCIA?	Date of 1st Comm.	Office use ONLY		
						Class (E1, E2, CFF, Confirmation)	Day/Time /Room	Special need
1.								
2.								
3.								
4.								

NOTE: Required forms to be submitted to the Office :
Birth Certificate, Baptismal Certificate, First Communion Certificate

CONSENT: Please read and by signing you agree to the following:

- 1) I agree to attend all required meetings, Sunday masses, retreats that concerns my child's formation.
- 2) For the safety of my child/ren I agree to walk and sign in my child/ren to class and pick-up from class.

Parent/Guardian Full Name (Please Print): _____

Parent/Guardian Signature _____ Date _____

Today's Date: ___/___/___

***Previous Balance:**

\$ _____

**Form
2/2**

REGISTRATION FEES

Amount Due

Basic Fees	1 child	\$115	\$
	2 children	\$150	\$
	3 or more	\$180	\$

ADDITIONAL FEES PER CHILD

+ Elementary: Book and Sacramental fees	Book – (all grades)	\$30 x _____	\$
	E2 - 2 Sacramental Bks	\$30 x _____	\$
	RCIA Yr 2	\$30 x _____	\$
			\$
+ Confirmation: Books and Sacramental fees	C1 (book ,retreat)	\$75 x _	\$
	C2 (2 Books, weekend retreat, T-shirt, gown)	\$175 x _____	\$

	2021-2022 Year Total	\$
	+ Previous Balance	\$
	Sub-Total	\$

DISCOUNTS:

CFF (Continuing Faith Formation) \$50/child - \$
Early Registration (July 12-26)* Family discount -
with minimum payment of \$65 \$40

→ Payment through FAITH Direct: <input type="checkbox"/>	TOTAL AMOUNT DUE	\$
	Payment	\$
	BALANCE	\$

→ Payment can also be done in person – Cash or Check ONLY

Staff	Date	Type of payment (Cash, check, Faith Direct)	Amount	Receipt #	Balance

- I agree to pay all fees due to St. Elizabeth Ann Seton for the services rendered to my child/ren in Religious Education.
- I understand that Certificates will not be released if there is an outstanding balance.

Parent/Guardian Full Name (Please Print): _____

Parent/Guardian Signature _____ Date _____