



Family/Billing Information

Family Last Name: _____ Home Phone: _____

Address: _____

City: _____ State: MI Zip: _____

Family Email (please print clearly): _____

Emergency Contact Person (Other than parent): _____

Phone: _____ Relationship: _____

Child resides with (circle one): Both Parents Mother only Father only

Is your family registered with St. Michael Parish? (circle one) Yes or No

Father's Information

Complete address if different from above

Father's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Catholic _____ Other _____

Mother's Information

Complete address if different from above

Mother's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____

Work Phone: _____

Cell Phone: _____

Catholic _____ Other _____

Photo Release Information

Our Policy: At our classes, workshops, youth offerings, and other special events, we sometimes take pictures for publicity or to share with parishioners and parents. Pictures may be displayed on our bulletin boards, print publications like flyers, our bulletin, newsletters, and occasionally on our parish website (stmichaelgl.org). We will *not* publish any pictures in which children can be recognized by face on our Facebook pages or in local newspapers. Also, we will *not* publish any names in any of these mediums.

If you **do not** wish to have pictures of your child(ren) published in any of the above ways, please mark an X in the box below.

I deny permission to St. Michael Parish to publish a picture of my child(ren) in any of the above ways.

Tuition Rates

Office use only

Check # _____

Credit Card

Cash

Online Payment

Amt Received \$ _____

1 Student = \$90, 2 Students = \$170, 3 or more = \$235

15% discount for registrations received by September 17, 2020.

Grade K-9 Students: _____ = _____

15% Discount: (_____)

Total _____

Total Tuition _____

Reg. Rec'd Date

QB	RE
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Student Information



SESSIONS AVAILABLE:

- Catechesis of the Good Shepherd (CGS): Closed until further notice due to COVID
- 1-6 Religious Education: Mondays in the Church Fellowship Hall—4:30-5:45 pm
- K-6 Family Home Study: Second Thursday of each month in the Church Fellowship Hall—6:00-8:00 pm
- Grades 7-12 Religious Education : in the Church Fellowship Hall—6:00-7:30 pm
- Online option

Student #1

First Name Middle Name Last Name

School Attending: _____ Grade _____ Birth Date _____

Please circle one
● Monday Class
● Family Home Study
● Sunday Class
● Online Class

Circle if Preparing
● Reconciliation & Eucharist
● Confirmation

ALLERGIC REACTIONS (please list ALL known allergies and type of reaction):

MEDICAL CONDITIONS (physical/psychological/developmental) we should be aware of:

PRESCRIPTION MEDICATIONS they currently take:

Student #2

First Name Middle Name Last Name

School Attending: _____ Grade _____ Birth Date _____

Please circle one
● Monday Class
● Family Home Study
● Sunday Class
● Online Class

Circle if Preparing
● Reconciliation & Eucharist
● Confirmation

ALLERGIC REACTIONS (please list ALL known allergies and type of reaction):

MEDICAL CONDITIONS (physical/psychological/developmental) we should be aware of:

PRESCRIPTION MEDICATIONS they currently take:

Student #3

Please circle one Circle if Preparing
First Name Middle Name Last Name

School Attending: _____ Grade _____ Birth Date _____

● Monday Class ● Reconciliation & Eucharist
● Family Home Study
● Sunday Class ● Confirmation
● Online Class

ALLERGIC REACTIONS (please list ALL known allergies and type of reaction):

MEDICAL CONDITIONS (physical/psychological/developmental) we should be aware of:

PRESCRIPTION MEDICATIONS they currently take: