

**St. John the Apostle  
Religious Education Registration Form  
ONE COMPLETE FORM PER CHILD BEING REGISTERED**

<b>Family ID</b>	<b>Today's Date:</b> _____								
<b>Family Name:</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"><b>FATHER:</b></td> <td style="width: 50%; border: none;"><b>MOTHER:</b></td> </tr> <tr> <td style="border: none;">Last Name: _____</td> <td style="border: none;">Last Name: _____</td> </tr> <tr> <td style="border: none;">First Name: _____</td> <td style="border: none;">First Name: _____</td> </tr> <tr> <td style="border: none;">Middle Name: _____</td> <td style="border: none;"><b>Maiden Name:</b> _____</td> </tr> </table>	<b>FATHER:</b>	<b>MOTHER:</b>	Last Name: _____	Last Name: _____	First Name: _____	First Name: _____	Middle Name: _____	<b>Maiden Name:</b> _____
<b>FATHER:</b>	<b>MOTHER:</b>								
Last Name: _____	Last Name: _____								
First Name: _____	First Name: _____								
Middle Name: _____	<b>Maiden Name:</b> _____								
<b>Family Information:</b>	Street Address Line 1 _____ Street Address Line 2 _____ City/State _____ Zip Code _____ Family Home Phone No. _____ Father's Cell Phone No. _____ Mother's Cell Phone No. _____ <b>Family EMAIL Address</b> _____  I wish to be added to the Text Notification List in case of class cancellations. Mobile number : _____ Phone Company (Verizon, Sprint, etc) _____								
<b>Student Name:</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Last Name: _____</td> <td style="width: 50%; border: none;">Gender: _____</td> </tr> <tr> <td style="border: none;">First Name: _____</td> <td style="border: none;">Grade in Rel. Ed.(2021-2022) _____</td> </tr> <tr> <td style="border: none;">Middle Name: _____</td> <td style="border: none;">Grade in School (2021-2022) _____</td> </tr> <tr> <td style="border: none;">Birthdate: _____</td> <td style="border: none;">Birthplace: _____</td> </tr> </table> Allergies/Medical/Learning challenges: _____ _____ _____	Last Name: _____	Gender: _____	First Name: _____	Grade in Rel. Ed.(2021-2022) _____	Middle Name: _____	Grade in School (2021-2022) _____	Birthdate: _____	Birthplace: _____
Last Name: _____	Gender: _____								
First Name: _____	Grade in Rel. Ed.(2021-2022) _____								
Middle Name: _____	Grade in School (2021-2022) _____								
Birthdate: _____	Birthplace: _____								
	<b>My child has NOT been Baptized</b> _____ <b>My child was Baptized</b> _____ Date of Baptism: _____ Baptismal Church _____ Baptismal Church City/State _____ <b>My child has received the following Sacraments (Please circle)</b> First Confession                  First Holy Communion                  Confirmation								

**St. John the Apostle  
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<b>Page 2 Child's Name:</b>	Last Name: _____ First Name: _____
<b>EMERGENCY CONTACT INFORMATION</b>	NAME: _____ Relationship to child: _____ Cell Number: _____ Home Number: _____  Name: _____ Relationship to child: _____ Cell Number: _____ Home Number: _____
<b>CLASS CHOICES:</b> <b>Tuition costs:</b> \$100.00 one child \$150.00 two children \$200.00 three or more  <b>I would like to pay :</b> _____ One time payment _____ 3 Installments _____ other  <i>Please make check payable to: St. John the Apostle</i>	<b>Classes will be filled on a first-come, first-filled basis. Please indicate your choice of the following by marking 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice.</b>  <div style="border: 1px solid black; padding: 5px; margin: 5px 0;"> <b>PREVIOUS RELIGIOUS EDUCATION RECEIVED AT THE PARISH of:</b> </div> <p style="text-align: center;"><i>Note: Enter a 1, 2 and 3 to indicate your choices with "1" being highest priority.</i></p> <p style="text-align: center;"><b><u>Elementary (Grades K-6)</u></b></p> <b>Kindergarten</b> _____ <b>Tuesday 4:15</b> _____ <b>Tuesday 5:45</b> _____ <b>Home School</b> <b><u>GRADES 1-6</u></b> _____ <b>Tuesday 4:15-5:15 p.m.</b> _____ <b>Tuesday 5:45-6:45 p.m.</b> _____ <b>Wednesday 4:15-5:15 p.m.</b> _____ <b>Wednesday 5:45-6:45 p.m.</b> _____ <b>Thursday 4:30 – 5:30 p.m.</b> _____ <b>WED 5:45 3<sup>rd</sup> Grade Special Sacraments</b> _____ <b>Home School Option</b> _____ <b>"catch up" class (Baptism, First Communion)</b> <p style="text-align: center;"><b><u>Middle School (Grades 7 &amp; 8)</u></b> <i>Enter a 1 and 2 for choices:</i></p> _____ <b>Monday 4:30-5:45 p.m.</b> _____ <b>Monday 7:00 – 8:15 p.m.</b> _____ <b>Tuesday 7:00-8:15 p.m.</b> _____ <b>Home School Option</b>
<b>RCIC Special Sacraments</b>	<b>If your child is behind in receiving the Sacraments, please call the DRE, Mr. Edward Spinelli (703-777-1317, Ext. 102) prior to registration.</b> _____ <b>Spec. Sacraments Tuesday 7:00-8:00 p.m.</b> _____ <b>4<sup>th</sup>-6<sup>th</sup> Grade</b> _____ <b>Spec. Sacraments Tuesday 7:00-8:15 p.m.</b> _____ <b>7<sup>th</sup>-8<sup>th</sup> Grade</b> _____ <b>Spec. Sacraments Tuesday 7:00-8:15 p.m.</b> _____ <b>Teens</b> _____ <b>Special Sacraments Wednesday 5:45-6:45 p.m.</b> _____ <b>4<sup>th</sup>-6<sup>th</sup> Grade</b>
	<b>PARENT SIGNATURE</b> _____ <b>Date</b> _____
<b>For Office Use Only</b>	<b>Payment Received</b> _____ <b>Amount Received</b> _____ <b>Cash</b> _____ <b>Check #</b> _____ <b>Sorry NO CREDIT CARDS accepted</b>

**Please mail or drop off your forms, copies of Baptismal certificates and fee:**

*Email Option: Alternately, you may fill, save and Email to:  
diana@stjohnleesburg.com (Grades K-6)  
e.spinelli@stjohnleesburg.com (All others)  
and deliver your payment separately. Thank You!*

**Office of Religious Education  
St. John the Apostle  
101 Oakcrest Manor Dr NE  
Leesburg, VA 20176**