

Our Lady of Mount Carmel Church – Religious Education Office

10 County Road, Tenafly, NJ 07670 - (201) 871-4662

RELIGIOUS EDUCATION REGISTRATION 2024-2025

FAMILY NAME _____ Registered parishioner of OLMC: _____/Attend Mass at OLMC: _____

Mailing Address _____ E-mail Address _____

Father _____ Father's Religion _____ Phone # _____

Mother _____ Mother's Religion _____ Phone # _____
(first & maiden names)

Emergency Contact: (Name) _____ (Phone #) _____

Please select a class option and indicate your choice below.

A \$100 payment is required to hold your place and will be applied to the fee.

Balance payable by September 15, 2024.

Class Options

Sunday Gr. 1-8 (8:45-9:55 a.m.)

Tuesday Gr. 1-8 (3:30-4:45 p.m.)

Home Study Except Gr. 2 and Gr. 8

Fee Information

1 child - \$350

2 children - \$450

3 or more children - \$550

- Payment can be made by check, money order, or cash and dropped off at the Religious Education Office or by credit card.
- Do not mail cash. Checks and money orders may be mailed; check is payable to "Our Lady of Mount Carmel Church."
- Installment payments accepted.
- The registration fee supports the Religious Education Program and Our Lady of Mount Carmel Church.

RE-REGISTRATION INFORMATION

This form is to register a student for grades 1 through 8, ONLY.

Do not register a 9th grade Confirmation student on this form.

<u>Child's Name</u>	<u>Religious Education Grade 2024-2025</u>	<u>Class Option (Specify Day)</u>	<u>Name of Public or Private School Attending in 2024-2025</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please use the section below only for NEW children entering the program.

Child's Name: _____ Date of Birth: _____ Place: _____

Baptism Date: _____ Church: _____ City/State: _____

School Attending (Sept., 2024): _____ Grade: _____ Town: _____

Religious Education Grade (Sept., 2024): _____ Class Option (day): _____ Medical/Educational Info: _____

Child's Name: _____ Date of Birth: _____ Place: _____

Baptism Date: _____ Church: _____ City/State: _____

School Attending (Sept., 2024): _____ Grade: _____ Town: _____

Religious Education Grade (Sept., 2024): _____ Class Option (day): _____ Medical/Educational Info: _____