Tri-Parish
1205 Front Street, Cashton, WI 54619
(608) 654-5654 ~ smash3pdre@mwt.net

CCD Registration 2017-2018

Parents _____
LAST NAME Father Mother Mother's Maiden

Address _____
Street City Zip Code

Phone _____ Email _____
Please make sure you list an email you check regularly.

Emergency Contact _____
Name Relationship Phone

Cell Phone Contacts _____
Father Mother Emergency

Parish where family is registered: St. Mary's St. Augustine Sacred Heart

For Grades 1-6: which program will you be attending? St. Augustine Sacred Heart

Child's Name (include last name if different)	Birth Date & Place of Birth	Grade Level	Allergies/Medical Problems	Date/Place of Baptism City/State

*If your child was NOT baptized in one of parishes, please obtain a copy of the baptismal certificate for our file.

Fees

1 Child	$60
2 Children	$90
3 Children	$110
4 Children	$120
First Communion	$10
Confirmation-10th	$25

For Office Use Only

Date: _____ Rcd by: _____

Amount Paid: _____ Balance: _____

Check #: _____ Cash: _____

~Checks can be made payable to attending program.~

There is a requirement of 10 service hours per family or a $150 buy-out fee.
6 hours – fundraising/parish – parish dinners, cheese boxes, pizzas, chicken Q, Education Committee, etc
4 hours – liturgical – Children's Liturgy, reading, Eucharistic minister, choir, serving, etc

_____ I am choosing the buy-out option and will pay $150 in addition to my tuition fee.