

ID PHOTO OF  
STUDENT

**SAINT PATRICK'S PARISH RELIGIOUS EDUCATION PROGRAM  
REGISTRATION FORM FOR RETURNING STUDENTS  
PREP Year 2020-2021**

**STUDENT INFORMATION:** All information gathered in this form will be treated with confidentiality and will be shared only with parent and guardian's consent.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Grade in school by September 2020 \_\_\_\_\_ Last grade in PREP \_\_\_\_\_

Father's Name: \_\_\_\_\_

Religion \_\_\_\_\_

Telephone (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ Email \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Telephone: (Work) \_\_\_\_\_ (Home) \_\_\_\_\_ Email \_\_\_\_\_

Guardian's Name: \_\_\_\_\_ Contact Number \_\_\_\_\_

**Please state anything that you would like the Catechists to know about your child's allergies, medical conditions, ESL, learning difficulties etc.**

\_\_\_\_\_  
\_\_\_\_\_

**EMERGENCY CONTACT**

Contact Person: \_\_\_\_\_ Phone \_\_\_\_\_

Alternate Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**Photo Video Permission:**

I understand that during the course of the PREP year, photos/videos may be taken to record significant events of the year. I (consent) (do not consent) for my children's photos/videos to be used in Church publications such as Parish Bulletin, newsletter, website and PREP Brochures.

Parent/guardian's signature: \_\_\_\_\_ Date : \_\_\_\_\_

**REGISTRATION FEE**

One Child - \$100

Two or more children - \$120

**OFFICE USE ONLY (PLEASE ENCIRCLE THE PAYMENT MADE)**

Registration Fee:     \$100                     \$120

Payment by:             Cash                     Cheque

RECEIVED BY: \_\_\_\_\_ Date: \_\_\_\_\_