

Immaculate Conception Faith Formation
510 Oakwood Avenue
East Aurora, NY 14052 655-0067

NEW STUDENT REGISTRATION
2022-2023

NAME _____ **PHONE NO.** _____
 LAST FIRST MIDDLE

ADDRESS _____
 NUMBER STREET CITY ZIP CODE

DATE OF BIRTH _____ **Circle one - MALE / FEMALE**

FATHER'S NAME _____ **RELIGION** _____

MOTHER'S NAME _____ **RELIGION** _____
 FIRST NAME *MAIDEN NAME*

ADDRESS TO: (MR/MRS) (DR/MRS) (MR/DR) (DR/DR) (MR.) (MRS.) (MS.) (Circle one)

THE NAME OF THE PARISH WHERE YOU ARE REGISTERED _____

School your child is attending in September. Grade _____

Grades 1 - 5 Saturday
Grades 6, 7, 8, 10 Thursday
Grace 9 - online.

(PLEASE ENCLOSE A COPY OF THE BAPTISMAL CERTIFICATE IF NOT BAPTIZED AT IMMACULATE CONCEPTION PARISH.)

SACRAMENTS RECEIVED:

Parish, City, & Date of Baptism _____

Parish, City, & Date of Penance _____

Parish, City, & Date of Eucharist _____

EMERGENCY TELEPHONE NUMBERS:

PLEASE GIVE NAME/PHONE #

Relative/Friend _____

Mother's Cell/Work _____

Father's Cell/Work _____

Email(Please print clearly)_____

TUITION FEE

\$50.00 - per child

\$90.00 - 2 children

\$120.00 - 3 or more children

SACRAMENTAL FEE

(Gr. 2) Reconciliation - \$30.00 – per child

(Gr. 3) Eucharist - \$30.00 – per child

(Gr.10) Confirmation - \$50.00 – per child

Please indicate the area you are willing to volunteer your assistance:

____ Catechist ____ Classroom Assistant ____ Substitute Teacher

____ Hall Monitor (Saturday) ____ Hall/Parking Lot Monitor (Thursday)

Please inform us of any allergies, medical, or learning problems that may bear on the student's learning or behavior. (Ex: reading problems, allergies, ADD, etc.) **This is kept confidential.** Thank you.