

Immaculate Conception Faith Formation  
510 Oakwood Avenue  
East Aurora, NY 14052  
655-0067  
Re-Registration – 2022-2023

PARENT NAME \_\_\_\_\_ PHONE NO. \_\_\_\_\_  
(last name) (first name)

ADDRESS \_\_\_\_\_ ZIP CODE \_\_\_\_\_

(MR/MRS) (DR/MRS) (MR/DR) (DR/DR) (MR. ONLY) (MS. ONLY) circle one

THE NAME OF THE PARISH WHERE YOU ARE REGISTERED \_\_\_\_\_

(IF YOU HAVE A CHILD ENTERING THE PROGRAM FOR THE FIRST TIME, PLEASE CALL THE OFFICE OF FAITH FORMATION FOR A “NEW” STUDENT REGISTRATION FORM)

Grades 1 – 5 Saturday  
Grades 6, 7, 8, 10 Thursday  
Grade 9 – online

Child’s Name

Grade in September

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

**EMERGENCY CONTACT PERSON / TELEPHONE NUMBERS:**

Relative/Friend \_\_\_\_\_  
Mother’s Cell/work \_\_\_\_\_  
Father’s Cell/work \_\_\_\_\_  
Email (please print clearly) \_\_\_\_\_

**TUITION FEE:** (received **by** June 15<sup>th</sup>)

\$50.00 - 1 child  
\$90.00 - 2 children  
\$120.00 - 3 or more children

**SACRAMENT FEE**

(Gr. 2) Reconciliation - \$30.00 per child  
(Gr. 3) Eucharist - \$30.00 per child  
(Gr.10) Confirmation - \$50.00 per child

**\$20.00 late fee AFTER June 15.**

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 medical or learning problems that may bear on the student’s learning or behavior. (Ex. allergies, reading problems, ADD, etc.) **This is kept confidential.** Thank you.