

St. Nicholas R.C. Church
 Vocationist Fathers
 442 E Brinkerhoff Avenue – Palisades Park, NJ 07650
 (201) 944-1154 www.stnicholasrcchurch.org

Registration paid ____/____/____
Check # _____
Bank _____
Amount \$ _____
____ Cash
____ Child/ren

CCD REGISTRATION FORM 2018-19

Child's Name: _____ Date of Birth: ____/____/____

Father: _____ Mother: _____

Baptized at _____ First Communion at _____

Address: _____ City: _____

Home Phone: _____ Cellphone: _____

Emergency: _____ Email: _____

School: _____ Grade: _____ CCD Grade: _____

If your child has any special needs, please describe: _____

- I will drop off and pick up my son/daughter INSIDE THE CHURCH HALL.
- _____ is authorized to pick up my son/daughter in Church Hall.
- My son/daughter will walk home by him/herself.

FOR NEW STUDENTS ONLY:

Previous Years of Instruction: Grade - 1st__ 2nd__ 3rd__ 4th__ 5th__ 6th__ 7th__ 8th__

Name of Church of Previous Instruction: _____

CCD FEES:	Parishioners	Non-Parishioners
One Child	\$ 70.00	\$ 200.00
Two Children	\$ 95.00	\$ 225.00
Three Children	\$ 140.00	\$ 255.00

Please return it by mail or in person to the rectory's office no later than 09/09/2018

Signature of parent/guardian: _____ Date ____/____/____