



2019-2020

Date: _____

NEWMAN FAMILY FAITH FORMATION REGISTRATION FORM

Christ the Teacher University Parish
Newman Catholic Student Center

Cheryl Lehman, DRE | newmanniudre@gmail.com | 815.787.7770

ADULTS, COLLEGE, RCIA and (Parents/Guardians of K - 12)

Name (First Last): _____

Address: _____

Phone: Home: _____ Cell: _____

E-mail Address: * _____

** Please supply e-mail, especially if your child is in a sacramental year.*

KINDERGARTEN through 12TH GRADE

<u>Student's Name (First Last)</u>	<u>Date of Birth</u>	<u>Grade in Fall</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If you need more space, please use the back of this form.

Describe any medical problems, allergies, or learning disabilities we should be aware of:

FAMILY FAITH FORMATION PROGRAM COSTS

<u>Participants</u>	<u>How Many?</u>	<u>Amount</u>	<u>Subtotal</u>
Kindergarten through 8 th Grade:	_____	X \$125 =	\$ _____
9 th Grade through 12 th Grade (High School):	_____	X \$25 =	\$ _____
College Student, RCIA, Adult (Non-Couple):	_____	X \$25 =	\$ _____
Couple:		\$40 =	\$ _____
		Total:	\$ _____

Family Tuition Cap:	Total tuition will not exceed \$300 per family .
Scholarships:	Scholarships funds are available if needed. Please contact the DRE.
Catechist Deduction:	Catechists pay half the regular assessed tuition.

Enclosed Amount: \$

Please return this form with a check payable to **"Newman Center Religious Education"**.