

Our Lady of Perpetual Help - Saint Agnes  
Student Registration Form for Fall  
Classes 2023-2024

**Tuesday's** 4:30-6pm (Grade 1-6<sup>th</sup>)  
**Sunday's\*** 5:30-8:00pm (Grade 7<sup>th</sup> and 8<sup>th</sup>)

\* Not every week

Please print all information below. Thank you.  
One form per student

Name \_\_\_\_\_ M or F  
*Last First Middle*

Address \_\_\_\_\_ Zip  
*Street Town State*

Home Phone: ( ) \_\_\_\_\_ Birth Date: \_\_\_\_\_ Grade (2023-2024) \_\_\_\_\_

Parish attended last year for Religious Education: \_\_\_\_\_

**Sacramental Record-New Student (Only)**

	Date	Church	Location/Parish
Baptism*	_____	_____	_____
First Eucharist	_____	_____	_____
Baptized in another denomination:	_____		
Date:	_____	Church:	_____
Address:	_____		
City:	_____	State:	_____ Zip : _____

Are you Registered at OLPH- St. Agnes? YES \_\_\_\_\_ Envelope # \_\_\_\_\_ IF NOT, at  
what parish are you registered? \_\_\_\_\_  
*Name of Church Town/State*

## Family

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
*Last Name/ First Name*

Maiden Name: \_\_\_\_\_

Cell Phone (text ok or no): (\_\_\_\_) \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
*Last Name/ First Name*

Cell Phone (text ok or no): (\_\_\_\_) \_\_\_\_\_

### Legal Guardian, if different from above:

Name: \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Town State Zip*

**FAMILY EMAIL ADDRESS: Primary source of communication**

\_\_\_\_\_  
**\*\*\*PLEASE PROVIDE AN UPDATED EMAIL THAT YOU CHECK MOST OFTEN-THIS IS THE MAIN SOURCE OF COMMUNICATION\*\*\***

PARENT MARITAL STATUS: Married Widowed Divorced Separated Single

Child Resides with: Mother Father Grandparent Other \_\_\_\_\_

### EMERGENCY CONTACT **other than parent:**

Name \_\_\_\_\_

Relationship to Child: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Health:** Does your child have learning needs or medical conditions (i.e., Allergies, etc.)? \_\_\_\_\_

Learning Disability- Classification/IEP? \_\_\_\_\_

Medical- Please Explain: \_\_\_\_\_

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**SUCCESS of our Religious Ed. Program relies on MANY VOLUNTEERS**

**I will help with the following: Catechist Class Aide Assist at Events**

**Promotional Release**

I also consent to the use of any videotapes and/or photographs in which my child may appear by the Diocese of Trenton and/or the parish. I understand that these materials are being used for promotion of the parish Religious Education programs and/or activities, which may include recruitment and fundraising efforts.

**Parent/ Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TUITION/ FEES:**

**All Classes - 1 Child- \$160, 2 children- \$300, 3 children -\$405, 4 children-\$480**

**Sacramental fees for 2<sup>nd</sup> and 8<sup>th</sup> grade- \$80**

Families who need assistance, should contact Mary McKelvey (732-291-0272 ext. 116) or Reled@olphstagnes.org so that arrangements can be made for payments or for a reduction in fees. Please do not delay registration due to need. **Tuition checks should be made out to: OLPH-St. Agnes Parish, Mailed to: 103 Center Ave, Atlantic Highlands, NJ 07716**

**This form must be completed in full, one form per student.**