

**REGISTRATION 2010-2011**  
**MIDDLE SCHOOL IMPACT : GRADES 6-8**

**Our Lady Of Perpetual Help**  
**4795 Ilchester Road**  
**Ellicott City, MD 21043**  
**410-747-0131**

**CHILD'S INFORMATION**

Child's Full Name (First, Middle, Last)

\_\_\_\_\_ (Nickname) \_\_\_\_\_

Grade for 2010-2011: \_\_\_\_\_ Date of Birth \_\_\_/\_\_\_/\_\_\_\_\_

School: \_\_\_\_\_

Is this your first time enrolling in Religious Education? Yes  No

**SACRAMENTAL INFORMATION (New Students only)**

	Date	Church/Parish
Baptism:	_____	_____
First Penance	_____	_____
First Eucharist	_____	_____
Confirmation	_____	_____

**FAMILY INFORMATION (Please fill in complete address)**

Home Address: \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Home Telephone \_\_\_\_\_ Email: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION (Please update)**

Please list all parents, stepparents, and legal guardians. Use the back if necessary.

Father

Mother

Name (first & last) \_\_\_\_\_

Religion: \_\_\_\_\_

Work Telephone \_\_\_\_\_

Child lives with this parent Yes  No  Yes  No

**FORMATION OPTIONS 2010-2011**

Please check the one box that indicates the Catholic Formation program your child will participate in during the 2009-2010 school year. If IMPACT is chosen, please be sure to fill out the back of this form.

- \_\_\_ My child will participate in the Middle School IMPACT Program (Please fill out back of form)
- \_\_\_ My child will participate in the HOME CONNECTION Program (See brochure)
- \_\_\_ My child will attend a Catholic school in 2010-2011

**TUITION PAYMENTS**

Fees for all classes are \$95 for 1 child, \$180 for 2, and \$260 for 3 or more per year. Payment must be made at time of registration. Registration should be completed by **July 31, 2010**. After July 31st a fee of \$25 per family will be added. If tuition assistance is needed please email [kfisher\\_olph@yahoo.com](mailto:kfisher_olph@yahoo.com). No child will be turned away for lack of funds.

**SPECIAL NEEDS:**

Please indicate below any physical handicaps, learning disabilities, behavioral issues, (i.e. ADHD), daily medications, medicinal or dietary allergies. Providing this information will help us to meet your child's needs.