

Sept. 8 – Rel. Ed. Orientation
 6:00 pm
 – Grades 1-9, (Parents & Students)
10th grade Confirmation students & parents 7:30
Sept. 15 – Grades 1-10 Classes begin

Our Lady Queen of Heaven Parish
2021-2022 Religious Education Form (Grades 1-10)
 750 10th Avenue South, Wisconsin Rapids, WI 54495 (715) 423-1251
 Email: reoffice@solarus.net

Date of Registration:



Family Last Name: _____ Home Phone (_____) _____

EMAIL _____

****Most of our communication will be via email, please list an email you check regularly****

Address: _____

City: _____ Zip Code: _____

We are new to the Our Lady Queen of Heaven Religious Education Program.

We are registered parish members.



Parent Marital Status: Married Single Divorced Separated Widowed Remarried

Parent Name:	Religion	Cell Phone:	Date of Marriage/place/City/State
Father			
Mother			
Maiden Name:			
Emergency Contact Person:			

I give permission to the OLQH Religious Education Program to publish, in the parish bulletin or display on the parish bulletin board, pictures of my son/daughter taken during various religious education parish functions. YES _____ NO _____

(Continued on reverse side)

Child's Name (include last name if different)	Birth Date / City & State	Fall of 2021 Grade Level	Allergies/Medical Problems	Date/Place of Baptism City/State of Baptism

Registration & Sacramental Fees:

1 Child \$70
2 Children \$130
3 or More Children \$150

Non-registered Parishioner -- additional \$50 fee
Reconciliation/1st Communion Fee (2nd Grade) -- additional \$25 fee
Confirmation Student Fee (10th Grade) -- additional \$30 fee

Total Fees Owed \$ _____

Total Fees Paid \$ _____

*If you need financial assistance, please contact the parish office to see what assistance is available.

All 1st Time Students, 2nd Graders, & Confirmation Students who were not baptized at OLQH are required to submit a Baptismal Certificate from the parish that they were baptized at.

For Office Use Only!

Date: _____

Amount Paid: _____

Check #: _____ Cash: _____

Balance Remaining: _____

Date: _____

Amount Paid: _____

Check #: _____ Cash: _____

Balance Remaining: _____