RELIGIOUS EDUCATION REGISTRATION

Fill in all of the information on the registration form on the back of this letter. IMPORTANT: Enter the school and grade that your child will be entering in Sept. 2023



REGISTRATION FEE

The registration fee is \$50 per child Please register your child now even if you are unable to pay at this time. Payment plans and tuition assistance and waivers are easily and readily available.



NEW STUDENTS

If you haven't submitted your child's baptismal certificate before or if your child is new and was not baptized at the Basilica, please enclose a copy of their baptism certificate. If you do not have a copy of the form you may call the parish where your child was baptized and ask them to FAX a (long) copy of the certificate to 617-445-1857.

We will also need a copy of your child's birth certificate if you are new to the program.



SHARE YOUR GIFTS & TALENTS WITH US!

Teachers and helpers are really needed. We promise to provide all of the training, support, materials and prayers that you will need. Even if you don't teach there are lots of ways to serve in our program. God has blessed you with so many talents and abilities – please share them with the parish!

We can only do this right if we do it together

CLASSES WILL MEET ON SUNDAYS FROM 10:00-11:00 AM IN THE PARISH CENTER.

FIRST CLASS WILL BE SEPTEMBER 24TH – You will receive a full calendar once you register



PLEASE BRING THE REGISTRATION FORM, THE REGISTRATION FEE, THE BIRTH CERTIFICATE AND BAPTISMAL CERTIFICATE TO THE PARISH OFFICE TO COMPLETE YOUR REGISTRATION

Questions? Please contact the Jaye Russo, Director of Religious Education jaye@bostonsbasilica.com or (617) 516-0380

Religious Education Program Grades K-High School Basilica of Our Lady of Perpetual Help – Mission Church

1545 Tremont Street Boston MA 02120 - (617)516-0380 jaye@bostonsbasilica.com



2023-2024

Parents Name(s) ______(mom's maiden)_____

HOME PHONE_____

Check #

FAMILY NAME _____

Date Registration Form Received:

Amount Received:

Payment Date:

PRIMARY CELL#	ALTERNATE CELL#				May we text?	
ADDRESS	TOWN/ZIP CODE					
FAMILY EMAIL						
IN CASE OF EMERGENCY: PE	RSON TO CA	ALL (Other than Parents/G	uardians):			
Name:		Phone: ()			Relationship:	
Photo Release: Do we have video, from events onto communication? YES N	our websit	• • •				_
ALL CLASSES ARE IN EN	IGLISH AN	D MEET SUNDAY MOI	RNINGS F	ROM 10:00	-11:00 a.m. IN THE PA	
NAMES OF CHILDREN	GENDER	GRADE & SCHOOL ENTERING	DOB		ACE OF FIRST COMMUNION	Please Check If not baptized or needs First Communion
1)						
2)						
3)						
4)						
Please provide a baptismal of seeking baptism for your ch		f your child was not bapti	zed at the	Basilica- Plea	se provide a birth certif	icate if you are
Allergies or other learning pr	oblems or o	conditions we should be a	ware of (fo	od reactions,	physical limitations, AD	HD,etc.)
REGISTRATION FEE: \$50. No child will be denied p		on in any program du			_	•

Amount Owed: