

Saint Pius X - Confraternity of Christian Doctrine
220 South Lawrence Road, Broomall, PA 19008

REGISTRATION - RETURNING STUDENTS- Please print clearly

FAMILY NAME _____

ADDRESS _____

HOME PHONE _____

WORK PHONE: _____ (father) _____ (mother)

E-Mail ADDRESS: _____

Is family registered in the parish? _____

Which Mass does the family usually attend? _____

Number of Persons in the Household _____

Has any family information changed? _____

STUDENTS TO BE REGISTERED:		C.C.D.		Session
Name of Student	Date of Birth	Grade **	School	Preferred

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

** If grade indicated is 2 or 6, print "S" after the grade to indicate desire to receive the Sacraments this year. Attendance at Mass every Sunday is required to prepare for Sacraments.

N.B. For session preferred, indicate afternoon or evening;
use "A" to designate afternoon and "E" to designate evening.
Afternoon classes meet 4:15 P.M. to 5:30 P.M. (K-6)
Evening classes meet 6:45 P.M. to 8:00 P.M. (K-8, ungraded)

Parent who can help with CCD Program: _____

Please check any areas in which you can help:

_____ C.C.D. Teacher	_____ Babysitting	_____ Phone Calls
_____ Classroom Aide	_____ Hall Monitor	_____ Office _____ Music

Registration Fees:

- \$180. per child: levels 1-6 & Sacrament Preparation; (\$170. with email address)
- \$ 90. per student for grades/levels 7-8 (Sacraments completed).
- \$ 90. per child in Kindergarten: (\$80. with email address for grades K,7-12)
- \$ 50. additional per student for out-of-parish & non-registered families.

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REGISTRATION - NEW STUDENT - Please print clearly

NAME _____ **SEX** _____
Baptismal Name Last

NICKNAME _____ **Date of Birth** _____

ADDRESS _____

E-MAIL ADDRESS: _____

PHONE _____ **Ethnic Background:** _____ **Caucasian**
_____ **Asian** _____ **Hispanic** _____ **African American** _____ **Other**

FATHER'S NAME _____
(Birth Father or Legal Adoption) first middle last

MOTHER'S NAME _____
(Birth Mother or Legal Adoption) first **MAIDEN** last

FATHER'S OCCUPATION _____ **WORK PHONE** _____

MOTHER'S OCCUPATION _____ **WORK PHONE** _____

RELIGION: FATHER _____ **MOTHER** _____

MARITAL STATUS OF PARENTS _____

CHURCH/PLACE OF MARRIAGE _____

_____ **DATE** _____
city

STEP-PARENT/GUARDIANS _____
(if applicable)

STEP-PARENT MAIDEN NAME _____ **RELIGION** _____

HEALTH INFORMATION & LEARNING DISABILITIES:

(list any health problems or learning disabilities of which we should be aware and/or which will affect classroom performance.)

Session Preference: _____
Afternoon - 4:15 P.M. to 5:30 P.M. Evening - 6:45 P.M. to 8:00 P.M.

CHILD LIVES WITH: _____ Both Parents _____ Father _____ Mother
_____ Joint Custody _____ Grandparents _____ Guardian

Is family registered in St. Pius X Parish? _____.

Which Mass does the family usually attend? _____.

Number of Persons in Household _____.

NAME OF SCHOOL FOR 2008-09 _____.

CHILD'S GRADE IN PUBLIC SCHOOL _____ CCD GRADE LEVEL _____

PREVIOUS C.C.D. _____

PREVIOUS PAROCHIAL SCHOOL _____.

SACRAMENTS CHILD HAS RECEIVED:

Baptism

Name of Church	Date
Address	

Penance

Name of Church	City	Date

Eucharist

Name of Church	City	Date

Confirmation

Name of Church	City	Date

Other Children Living at Home:

Name	School	Date of Birth

Parent who can help with C.C.D. Program _____

Please check areas in which you can help:

- _____ C.C.D. Teacher _____ Substitute Teacher _____ Babysitting
- _____ Classroom Aide _____ Hall Monitor _____ Calligraphy
- _____ Office Assistant _____ Music _____ Phone Calls

Registration Fees: \$180. per child in grades/levels 1-6 and students who are preparing for Sacraments; (\$170. with a valid email address). \$90. per child in grades/levels 7 -8 (completed sacraments) and grade "K"; (\$80. per child [K,7,8] if valid email address is provided) \$50. additional fee for students who are non-parishioners.