

**Deadline: Friday, August 9, 2019\***

\* OR until all classes are filled

**St. Pius X  
2019/2020 Sacramental Prep  
Non-Parishioner Registration**

834 Brookside Drive, Fairfield, CT 06824 | (203) 259-4800  
Kara Clegg, First Communion Coordinator [kclegg@st-pius.org](mailto:kclegg@st-pius.org)  
Shari Garcia, Confirmation Coordinator [sgarcia@st-pius.org](mailto:sgarcia@st-pius.org)

**Office Hours**

**Faith Center Office**  
Monday – Thursday  
9am – 4pm  
Friday  
9am – 12noon

*This registration form is to be completed by families that are **NOT** registered parishioners of St. Pius X as of **Friday, June 7, 2019.***

Father's Last Name: \_\_\_\_\_ Mother's **MAIDEN** Name: \_\_\_\_\_

Father's First Name: \_\_\_\_\_ Mother's First Name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (Zip)

Primary Cell Phone: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Secondary Cell Phone: \_\_\_\_\_ Relation to Student: \_\_\_\_\_

Primary Email Address: \_\_\_\_\_

Secondary Email Address: \_\_\_\_\_

**Class Information**

**Classes for Sacramental Preparation meet WEEKLY from 4:30PM – 5:30PM on Monday, Tuesday, OR Wednesday** in the Religious Education Building. Preparation for First Communion begins in Grade 2. Preparation for Confirmation begins in Grade 5.

Please read the **Sacramental Preparation Policies** posted on our website, [www.st-pius.org/sacrament-prep-home](http://www.st-pius.org/sacrament-prep-home) before completing your registration.

**Tuition**

*Tuition for families not registered with the parish as of Friday, June 7, 2019 is \$500 per child.*

**Student Registration**

Last	First	M/F	Grade 2019-20	1 <sup>st</sup> Choice (M, T, W)	2 <sup>nd</sup> Choice
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

*Continued on next page*

**Student Registration (continued)**

Last	First	M/F	Grade 2019-20	1 <sup>st</sup> Choice (M, T, W)	2 <sup>nd</sup> Choice
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

\*\*Please disclose any special needs, IEPs, or other notes you would like us to be aware of on the lines below.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*If your child has received **ANY** sacraments at another parish, please write the child's name, sacrament(s) received, parish name/city/state on the lines below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

***Your signature below acknowledges that you have read and accept our policies and Parent Agreement.***

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

**For Office Use ONLY**

Date Received: \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Recorded by: \_\_\_\_\_

Check # \_\_\_\_\_ CC \_\_\_\_\_ Cash \_\_\_\_\_