

2017/2018

Date: _____

OLQM Children's Faith Formation Registration for Returning Students

Fees: \$200 for 1 child \$300 for 2 children \$350 for 3 or more children

Reduced fees: (For families who have contributed \$500 or more during 2016)

\$125 for 1 child \$200 for 2 children \$250 for 3 or more children

***Please note: Any financial concerns will not exclude your child from Faith Formation Classes.
If paying by credit card, please provide all needed information.***

Family name: _____

Marital Status: _____

Student Names:

Grade as of
9/17

Medical issues or
Special Needs

School as
of 9/17

Mom Cell: _____ Dad Cell: _____

Email: _____

Has address/home phone changed from last year? Yes _____ No _____

If so, please provide updated information _____

To be completed by Office:

Amt. Paid: _____ Check # _____ Credit Card _____ Cash _____ W _____

Date Computer Updated: _____ Updated by: _____

If paying by Credit Card, please provide the following information:

____ AMEX ____ MC ____ VISA Expiration Date: _____ Amt. _____

Credit Card Number: _____

Zip Code for Billing Address: _____ Street #: _____

Name on Credit Card: _____

Cardholder's Signature: _____

To be completed by Office:

Credit Card Entered by: _____ Date Entered: _____

Amount being charged: \$ Approval Code: Batch #