

**St. Joachim Parish Religious Education Registration Form 2024/2025**  
601 W. Browning Rd., Bellmawr, NJ 08031  
856-931-8590

**Family Information:** **\*\*Registered Family Parish** \_\_\_\_\_

**\*Email address** (*necessary for all Religious Education correspondence*)

\_\_\_\_\_

Family last name \_\_\_\_\_

Father's name \_\_\_\_\_ Mother's Maiden \_\_\_\_\_

Child lives with – (*Please circle the one that applies*)    **Both**    **Mom only**    **Dad only**

Home address \_\_\_\_\_

City, State & Zip \_\_\_\_\_

Mom's Cell # \_\_\_\_\_ Dad's Cell # \_\_\_\_\_

Emergency contact Name \_\_\_\_\_

Phone # \_\_\_\_\_ Relationship to child \_\_\_\_\_

**Student information**    **\* INDICATE DAY OR EVENING PREFERENCE FOR LEVELS 1, 2 & 3 ONLY**

2024-25  
Student's full name    Grade    \* Day/Evening    Birth date    M/F

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

**TUITION PAYMENT INFORMATION** (Please indicate option below)

**1 Child \$150**

**2 or more Children \$225**

\_\_\_ I will pay tuition in full by September 10, 2024

\_\_\_ I will pay tuition Quarterly (Payments due Sept 10, Nov. 1, Feb. 1 and April 1)

\_\_\_ I will pay tuition Bi-Annually ( Payments due Sept. 10 and Feb. 1)

**(OVER)**

**MEDICAL INFORMATION**

Please list any special conditions that may affect your child, such as physical, emotional or learning issues, allergies to food, etc. We appreciate enough information to enable us to be sensitive and responsive to your child's needs. If necessary, please list the child below with their special needs.

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**\*\*\* NEW STUDENTS ONLY \*\*\***

**Please supply a copy of your child's Baptismal certificate when registering.**

**SACRAMENT DETAILS**

**NAME                                      Date/Sacrament                                      PARISH WHERE SACRAMENT TOOK PLACE**

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**PARENT MEDIA CONSENT FORM**

Permission is granted for a photo/image that includes this student without any personal identifiers to be published on St. Joachim's internet site, posting in our Church Gathering Space or School.

**YES**                                       **NO**

**Signature of Parent/Guardian** \_\_\_\_\_

**Date** \_\_\_\_\_