



**CHURCH OF THE RESURRECTION**

115 Pond Hill Road, Wallingford CT 06492

**STUDENT REGISTRATION FORM**

2020 - 2021

**Tuition Rates** *Tuition covers the cost of the student textbook, dinner on Sunday evenings, sacramental fee, & retreat fee*

1 child - \$100.00    2 children - \$150.00    3 or more children - \$175.00

***Student Information***

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_ M: \_\_\_\_\_ F: \_\_\_\_\_  
Address: \_\_\_\_\_ Town: \_\_\_\_\_ Zip: \_\_\_\_\_ Grade: 9  
Birthplace: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Phone #: \_\_\_\_\_

Sacrament of Baptism: \_\_\_\_\_  
Church Name                      City/town                      State                      Date

*\* New students to our program will need to get a copy of their Baptismal Certificate from the church of Baptism.*

\_\_\_\_\_

First Holy Communion: \_\_\_\_\_  
Church Name                      City/town                      State                      Date

Other important information & special needs: (medications, allergies, family situation, etc.) \_\_\_\_\_  
\_\_\_\_\_

***Parent Information***

Father's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Contact #: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Mother's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Contact #: \_\_\_\_\_  
Maiden Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Emergency Contact other than a Parent:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

I, \_\_\_\_\_ give permission to the Church of the Resurrection for the following:

- Allow pictures/videos of my child to be used on the church website and/or for other promotional areas
- Allow my child to participate in the VIRTUS Training program [www.virtusonline.org/virtus/virtus\\_description.cfm](http://www.virtusonline.org/virtus/virtus_description.cfm)

\_\_\_\_\_  
Parent Signature

**Contact Information**

Joseph R. Tatta, Director  
(203) 265-1694 [josephatta@yahoo.com](mailto:josephatta@yahoo.com)

**Please see the enclosed Confirmation Program Meeting Dates / Times**

*For Office Use Only:*

Tuition: Cash: \_\_\_\_\_ Check #: \_\_\_\_\_ Date Received: \_\_\_\_\_