

OUR LADY OF LOURDES - ST. ADALBERT PARISH

**STUDENT REGISTRATION
RELIGIOUS EDUCATION PROGRAM**
2110 S 32ND Ave * Omaha, NE 68105
402-346-0900 402-341-5604

Registration Date	_____	# of Children	_____
Office Use	Fee Due _____		
ONLY	Amt Pd _____	Cash	Check # _____
	Balance Due _____		

Family Last Name: _____ Contact Phone #: _____ Contact Email: _____

Contact Address: _____ City: _____ State: _____ Zip: _____

Parent 1/Guardian Name: _____ Parent 2 Name: _____

Parent 1 Cell #: _____ Email: _____ Parent 2 Cell #: _____ Email: _____

Emergency Contact Person/Relationship: _____ Phone #: _____

PLEASE Circle Or Check With Whom the Student(s) Reside: Both Parents Mother Father Guardian

Registration Fee: 1 child = \$75.00 2 children = \$140.00 3 Children = \$205.00 4 Children or more = \$270.00
Sacrament Fee (First Communion or Confirmation) = \$_____ per student.

BAPTISMAL CERTIFICATES ARE NEEDED FOR EVERY STUDENT ENROLLED. PLEASE PROVIDE ONE IF YOU HAVEN'T DONE SO ALREADY.

NAME OF STUDENT(S)			2020/2021 Program Year				Sacrament-Write YES or NO Below		
Last Name	First Name	Middle Initial	M/F	Date of Birth (MM/DD/YY)	Grade	School Name	Baptism	First Penance	First Eucharist

Please notify the Parish Office (402) 346-0900 of any changes to phone numbers, emails and/or home addresses.

Any Child with special needs, including food allergies? YES NO

IF YES, PLEASE GIVE YOUR CHILD'S NAME AND LIST HIS/HER FOOD/MEDICATION ALLERGIES.

WHEN APPROPRIATE, PLEASE COMPLETE THIS SECTION.

PLEASE GIVE YOUR CHILD'S NAME AND DETAIL HIS/HER EDUCATIONAL NEEDS AND ANY ACCOMMODATIONS: