

**St. Ann by the Sea / Our Lady of the Assumption Collaborative**  
**Office of Religious Education**  
**591 Ocean Street**  
**Marshfield, MA 02050**  
**781-834-4953**

PLEASE PRINT LEGIBLY

Parents: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Father's Religion: \_\_\_\_\_ Mother's Religion: \_\_\_\_\_

Marital Status:     Married     Divorced     Separated

**\*Class Choices:**

- A. Grades PreK-K:                      Once Monthly                      Tuesday                      4pm - 5pm
- B. Grades 1-5:                      Bi- Weekly                      Tuesday                      4pm - 5pm
- C. Grades 6-8:                      Bi-Weekly                      Tuesday                      4pm- 5pm
- D. Grades 9-10: PM                      Once Monthly                      Sundays                      6:00pm - the 7pm Mass
- E. Grade 11(Confirmandi): Meet 3 Sundays beginning October 1                      Sundays                      6:15pm - the 7pm Mass

PLEASE LIST YOUR CHILDREN GRADES Pre-K - 11

<b>Child's Name</b>	<b>Grade Sept. '23</b>	<b>A,B,C, D,E CCD Class</b>	<b>Date of Birth</b>	<b>Baptized Y/N Year &amp; Parish</b>	<b>Parish Affiliation</b>	<b>Learning Disability/ Medical Concerns</b>

**NOTE:** For the protection of your child and St. Ann by the Sea, it is imperative that we have your child's medical information. If your child has allergies, learning disabilities or is on medication, etc. please indicate on the form. This information will help us place your child with a teacher best suited to them and the information will only be shared with their teacher. Otherwise, it will be kept confidential. It is understood that by submitting this form you are giving permission to take pictures of your child for the purpose of identification and for group photos.

**New Registrants & 2<sup>ND</sup> Graders:** A copy of your child's baptismal record must accompany this form unless baptism was at St. Ann by the Sea or Our Lady of the Assumption.

**Registration Fee: \$70.00 per child or \$130.00 per family**

**Please Check One:** Fee Enclosed:  Please Send me an Invoice  Request for payment plan

**We need you!! Please consider teaching.** The registration fee is waived if you teach or assist.

I would like to teach or assist with CCD this year:     YES                       NO