

CHURCH OF THE ANNUNCIATION

80 Main Street, Bloomsbury, NJ 08804

Telephone - Rectory: (908) 479-4905 Religious Education: (908) 479-6708

e-mail: annunciationccd64@gmail.com

2025 – 2026 RELIGIOUS EDUCATION PROGRAM REGISTRATION FORM

FAMILY NAME: _____ DATE OF REGISTRATION: _____

STUDENT'S NAME: _____ BIRTH DATE: _____

ADDRESS: _____

E-MAIL ADDRESS: _____

HOME PHONE #: _____ CELL PHONE #: _____

Alternate contact in case of emergency
NAME / PHONE #: _____

NAME OF SCHOOL ATTENDING: _____ GRADE (As of Sept): _____

FATHER'S NAME: _____ RELIGION: _____

MOTHER'S MAIDEN NAME: _____ RELIGION: _____

SACRAMENTS RECEIVED	DATE	CHURCH	LOCATION
BAPTISM			
FIRST PENANCE			
FIRST COMMUNION			
CONFIRMATION			

CCD GRADES COMPLETED

YEAR									
GRADE	K	1	2	3	4	5	6	7	8

CLASSES MEET SUNDAY 10:00 – 11:25 AM : Grades 1 - 8 ____ \$85.00 per child
Kindergarten ____ \$45.00 Fee

TOTAL FEE ENCLOSED: _____ \$210.00 for 3 or more children in family.

Please make checks payable to: The Church of the Annunciation (memo – Religious Education)

Please Note: There will be an additional Sacramental Fee for children receiving Communion (\$25.00) and Confirmation (\$75.00)

Are there any allergies, health concerns or learning disabilities we need to be aware of? _____

Are you interested in becoming a teacher, substitute, or teacher's aide for REP? _____

Completed forms will be accepted at the REP Building during regular office hours, can be mailed to the address above or dropped in the collection box in the Church, in an envelope marked "COTA REP Registration".

NOTE: This form is to be completed for each new child entering our REP program. A copy of the child's Baptism Certificate is required.

Office : Date Rec. ___/___/___ Payment Amt. \$ _____ Check # _____ Sacramental Fee \$ _____