

St. Anastasia Religious Education Registration 2026-27

SECTION 1: Family Contact Information

Parent(s) NAMES at this address: _____

Address: _____ City: _____ ZipCode: _____

Primary Phone: _____ ALT Phone: _____ Is your family registered

at St. Anastasia?

Primary Email: _____ Yes No

ALT Email: _____

SECTION 2: Registering the Children

Note: If you are new to St. A's RE programming OR registering for First Communion or Confirmation Prep— you MUST provide a copy of each child's BAPTISM certificate (even if baptized at St. Anastasia)

Child #1 ___ Male or ___ Female

Register for (choose one option):

First & Last Name: _____

___ CGS (Gr PreK-K) - Sun

Date of Birth: _____ Grade in school: _____

___ Fam Cat (Gr K-6) ___ Tue OR ___ Wed

Sacraments completed: _____

___ First Comm Prep ___ Tue OR ___ Wed

Special needs: _____

___ Confirmation Year 1 (Gr 7+)

___ Confirmation Year 2 (Gr 8+)

___ Spanish CGS (Gr PreK-K) - Sat

___ Spanish RE ___ Level 1 ___ Level 2 ___ Level 3

Child #2 ___ Male or ___ Female

Register for (choose one option):

First & Last Name: _____

___ CGS (Gr PreK-K) - Sun

Date of Birth: _____ Grade in school: _____

___ Fam Cat (Gr K-6) ___ Tue OR ___ Wed

Sacraments completed: _____

___ First Comm Prep ___ Tue OR ___ Wed

Special needs: _____

___ Confirmation Year 1 (Gr 7+)

___ Confirmation Year 2 (Gr 8+)

___ Spanish CGS (Gr PreK-K) - Sat

___ Spanish RE ___ Level 1 ___ Level 2 ___ Level 3

Child #3 ___ Male or ___ Female

First & Last Name: _____

Date of Birth: _____ Grade in school: _____

Sacraments completed: _____

Special needs: _____

Register for (choose one option):

___ CGS (Gr PreK-K) - Sun

___ Fam Cat (Gr K-6) ___ Tue OR ___ Wed

___ First Comm Prep ___ Tue OR ___ Wed

___ Confirmation Year 1 (Gr 7+)

___ Confirmation Year 2 (Gr 8+)

___ Spanish CGS (Gr PreK-K) - Sat

___ Spanish RE ___ Level 1 ___ Level 2 ___ Level 3

Child #4 ___ Male or ___ Female

First & Last Name: _____

Date of Birth: _____ Grade in school: _____

Sacraments completed: _____

Special needs: _____

Register for (choose one option):

___ CGS (Gr PreK-K) - Sun

___ Fam Cat (Gr K-6) ___ Tue OR ___ Wed

___ First Comm Prep ___ Tue OR ___ Wed

___ Confirmation Year 1 (Gr 7+)

___ Confirmation Year 2 (Gr 8+)

___ Spanish CGS (Gr PreK-K) - Sat

___ Spanish RE ___ Level 1 ___ Level 2 ___ Level 3

Child #5 ___ Male or ___ Female

First & Last Name: _____

Date of Birth: _____ Grade in school: _____

Sacraments completed: _____

Special needs: _____

Register for (choose one option):

___ CGS (Gr PreK-K) - Sun

___ Fam Cat (Gr K-6) ___ Tue OR ___ Wed

___ First Comm Prep ___ Tue OR ___ Wed

___ Confirmation Year 1 (Gr 7+)

___ Confirmation Year 2 (Gr 8+)

___ Spanish CGS (Gr PreK-K) - Sat

___ Spanish RE ___ Level 1 ___ Level 2 ___ Level 3

If registering more than 5 children—please use a second form or attach a sheet of paper with all info above.

SECTION 3: Photo Release

On occasion we may take group pictures of children participating in religious education classes / activities. Names are not associated with the pictures, but they may be used in parish print or social media sites, such as the parish bulletin / website / Facebook / Instagram / X.

___ I DO give permission for Photo Release

___ I DO NOT give permission for Photo Release

SECTION 4: Tuition and Payment

- \$30 Materials Fee (applies to EVERY family)
- \$175 to register ONE child
- \$225 to register TWO children
- \$275 to register THREE children
- \$325 to register FOUR children
- \$375 to register FIVE or more children

Also: For those preparing for Sacraments (First Comm, Conf Year 1 or Year 2, Spanish Level 2)

- \$50 Sacrament Fee—per child preparing for sacraments

Please note that we have a \$380 CAP for registered parishioners

My Family Tuition Total: according to the schedule above: \$_____

___ I will pay by charge card using St. Anastasia's online giving using the QR Code:

___ I will call, mail in, or come to the office to use a charge card or drop off payment via check or cash.

Mail check to: St. Anastasia (w/Tuition in memo line), Rel Ed Ofc, 4571 John R, Troy, MI 48085

___ I will mail or drop off a check for HALF, and understand that the balance is due in January.

___ I will call the office to discuss my need for a partial waiver, 248-689-8380, Ext. 111.