



Registration Form

Transfiguration C.C.D.

This form is for Grades ONE through EIGHT and AOK students ONLY.

Print, Complete, and Mail this form with Tuition and Baptismal Certificate (if NEW to our program) to:

Church of the Transfiguration C.C.D.
4000 E. Castro Valley Blvd
Castro Valley, CA 94552

Parents' Names: _____

Home Address: _____

Email (*Important!*): _____ @ _____ Home Phone #: _____

Religion of Father: _____ Religion of Mother: _____

ONLY ONE for each Please: Mom's Cell/Work#: _____

Dad's Cell/Work #: _____

ALSO: One Additional Emergency Contact:

 Name Phone # Relationship to Child

Student(s) Name(s)	Birth Date	N=New R=Retur ning	Fall C.C.D. Grade	<u>School Attending</u>	FALL Grade in School	✓ SACRAMENTS RECEIVED: Baptism** Reconciliation Communion
1.						
2.						
3.						

PLEASE NOTE: All NEW students' registration MUST include a copy of Baptismal Certificate (if baptized).

Tuition Information

REGISTERED PARISHIONERS:

~1 child in Grades 1 thru 8 and/or A.O.K. = \$80.00 ~ 2 or more children in Grades 1thru 8 and/or A.O.K. =

\$130.00

NON PARISHIONERS:

~1 child in Grades 1 thru 8 and/or A.O.K. = \$100.00 ~ 2 or more children in Grades 1thru 8 and/or A.O.K. =

\$170.00

Please indicate amount enclosed: \$ _____ (Please make checks payable to: *Transfiguration CCD*)