



Mary, Queen of Heaven Church

1150 Donaldson Road, Erlanger, KY 41018

CCD Registration Form

This completed form may be emailed to lspencer@mqhparish.com, faxed to 859-525-7067 or mailed to the address above.

Child's Full Name: First: _____ Middle: _____ Last: _____

Date of Birth: _____ CCD Grade attending this year: _____

Child's Address: _____

Home Phone No: _____

Parent's Name: Father: _____ Catholic? Yes No

Mother: _____ Catholic? Yes No

Father's Cell Phone #: _____ Mother's Cell Phone #: _____

Father's Email Address: _____ Mother's Email Address: _____

Do both parents have custodial care of the child? Yes No

If no, name of parent to be contacted in case of emergency: _____

Name of the person who will pick up the child after CCD: _____

Relationship: _____ Phone #: _____

(If other than the custodial parent, a letter from the parent(s) is required that states who will be authorized to transport your child. The parent must give the CCD teacher a note on the night that someone other than the parent will be picking up the child.)

Baptismal Date: _____ Where Baptized: _____

If other than at MQH, is copy of Baptismal certificate attached? Yes No *(Parents are required to show proof of child's baptism – to be put in student's file)*

First Holy Communion Date: _____ Where Received: _____

Last Year of Religious Education: _____ Location: _____

School Attending: _____

Are you an active, registered parishioner of MQH? Yes No *(see Active Parishioner Policy)*

If no, in which parish are you registered? _____

(Parents who are not registered at MQH must have a letter from their pastor stating that he is aware of and agrees to your child attending CCD at MQH)

Registration fee paid? Yes No *(Attach payment to registration. Financial Aid is available to active parishioners. Contact the parish office at 859-525-6909 to see if you qualify.)*

Will you pay by electronic fund transfer through Commonwealth Bank & Trust? Yes No *(A voided check and a completed EFT authorization form must be attached to pay by EFT. See reverse side for EFT authorization form.)*

Signature: _____ Date: _____

Please explain any special concerns that we should be aware of in regards to your child. (e.g. learning impairments, ADD/ADHD, etc.) _____

Office Use Only:

CCD Fee Payment Method: _____



Mary, Queen of Heaven Church

1150 Donaldson Road, Erlanger, KY 41018

CCD EFT Authorization Form

This completed form may be emailed to lspencer@mghparish.com, faxed to 859-525-7067 or mailed to the address above.

NAME: _____

Name or names that appear on the account.

INSTITUTION ROUTING NUMBER: _____

Nine digit number beginning at far left bottom of check.

ACCOUNT NUMBER: _____

By signing this form I am authorizing Mary, Queen of Heaven to automatically debit the above mentioned account on a monthly basis beginning ____ October 5th ____ October 15th ____ October 25th (please check the date of your choice) and monthly thereafter in the amount of \$ _____ for 8 consecutive payments.

SIGNATURE: _____ **DATE:** _____

*****Please attach a voided check if you are not using the same account as last year.*****

CCD Tuition Rates

1 child	\$100.00
2 children	\$155.00
3 or more	\$185.00

Your payments may also be paid utilizing electronic fund transfers provided at no cost through Commonwealth Bank & Trust. The first payment will be in October and the last payment will be in May. Divide your tuition rate by 8 months to calculate your monthly payment.

Parish families who need financial assistance should contact the parish office at 859-525-6909 to inquire about financial aid. No **active** parishioner will be denied a Catholic education.