

# OUR LADY OF SORROWS

217 Prospect Street South Orange, NJ 07079 973-763-5454

## Youth Group – Confirmation Registration 2016-2017

*Please take time to read & complete*

Print Family name(s) and address as you wish them to appear on our mailing list. FAMILY NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_

Parishioner: OLS \_\_\_ Other \_\_\_

\*\*EMAIL: \_\_\_\_\_ \*\*

### EMERGENCY INFORMATION

Mother's Name \_\_\_\_\_ Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Father's Name \_\_\_\_\_ Day Phone \_\_\_\_\_ Evening Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_

Name of Candidate: _____ (please print)	
Date of Baptism: _____	Date of Communion: _____
Place of Baptism: _____	Place of Communion: _____
City: _____	City: _____
State: _____	State: _____

### TUITION

(this fee covers the two year course)

Amount due if registered before November 1, 2016  
\$175.00

After November 1, 2016  
\$ 210.00

**No one will be refused due to financial hardship.**

A) installment payments are acceptable (Please check here \_\_\_\_\_)

B) financial assistance is available if needed (Please check here \_\_\_\_\_)

### FOR OFFICE USE ONLY

Tuition Due \$ \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_

Amount Received \$ \_\_\_\_\_ Date \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_  
\_\_\_\_\_ \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_

Balance Due \$ \_\_\_\_\_