



**2019-2020
St. John the Baptist Parish
Religious Education Program**

Registration for Returning Students

Please return this completed form with your payment by June 24, 2019

Class Session selection (circle one): MONDAY or TUESDAY

Student's Name(s)

**2019-2020
PREP Grade Level**

I, _____ hereby certify that there are no changes in my child's (children's) health or living arrangements since the 2018-2019 registration of PREP at St. John the Baptist Parish. ***

Current email address:

Current telephone number: (home/Cell)

Home # _____ **Cell #** _____

*****If there are changes please list them here:**

