

Youth Faith Formation Course Registration for 2019-2020

Complete form, include payment, and return to the parish office. Drop off or mail to 2771 Oakwood Dr., Green Bay, WI 54304. Call or email the parish office if you have questions at 920.499.1546 or seas@seasgb.org.



ST. ELIZABETH ANN SETON
— CATHOLIC PARISH —

Child's First & Last Name	Date of Birth	School	Grade	Special Needs	Make Choices Here 1 child's classes \$85 each add'l child \$75 <input type="checkbox"/> Weekly Classes \$85 <input type="checkbox"/> First Reconciliation \$30 <input type="checkbox"/> First Communion \$30 <input type="checkbox"/> Confirmation \$60
Baptism info. needed for 1st Eucharist & Confirmation Church Baptized _____ City _____ State _____ Baptism Date _____					<input type="checkbox"/> Weekly Classes \$75 <input type="checkbox"/> First Reconciliation \$30 <input type="checkbox"/> First Communion \$30 <input type="checkbox"/> Confirmation \$60
Baptism info. needed for 1st Eucharist & Confirmation Church Baptized _____ City _____ State _____ Baptism Date _____					<input type="checkbox"/> Weekly Classes \$75 <input type="checkbox"/> First Reconciliation \$30 <input type="checkbox"/> First Communion \$30 <input type="checkbox"/> Confirmation \$60
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Baptism info. needed for 1st Eucharist & Confirmation Church Baptized _____ City _____ State _____ Baptism Date _____					<input type="checkbox"/> Weekly Classes \$75 <input type="checkbox"/> First Reconciliation \$30 <input type="checkbox"/> First Communion \$30 <input type="checkbox"/> Confirmation \$60
Totals	# in Weekly Classes	# in First Reconciliation	# in First Eucharist	# in Confirmation	Total Amount

Check here if you are interested in applying for financial assistance or setting up a payment plan option.

Family Name _____ Phone # _____ Alternate # _____

Primary Address (include city, state, zip) _____

Secondary Address (include city, state, zip) _____

Father's First & Last Name _____ Email _____

Mother's 1st & Last Name _____ Maiden Name _____ Email _____

Indicate which Method of Payment is included with this Form
 Cash _____ Check _____ Debit Card _____ Credit Card _____

Complete debit or credit card information here. Check which type of card is being used . . . Visa _____ MasterCard _____ DiscoverCard _____

Card Number _____ Card Verification Code _____ Expiration Date _____

Name on Card (print) _____ Signature of Cardholder _____

