

**ST. RITA CATHOLIC CHURCH**  
**RELIGIOUS EDUCATION REGISTRATION**  
**2024-2025 1<sup>st</sup>-12<sup>th</sup> Grade**

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**Mondays (Elementary school) and Wednesdays (Middle School), 6-7pm**

**Religious Education Fee:**     \$80 one student     \$100 two or more students

\*Tuition Assistance is available. Please contact the Parish Office at (703) 836-1640.

No one is refused enrollment for inability to pay.

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**FAMILY INFORMATION**

Family's Last Name: \_\_\_\_\_

Street Address (include apartment number, if applicable): \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Child resides with:

Both Parents     Mother     Father     Other (Specify name and relationship): \_\_\_\_\_

Registered at St. Rita Church:  Yes     No    Language spoken at home: \_\_\_\_\_

Were members of this family previously enrolled in St. Rita's Religious Education Program?     Yes     No

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**PARENT/GUARDIAN INFORMATION**

Who is the primary contact?     Parent/Guardian #1     Parent/Guardian #2     Both Parents/Guardians

**Parent/Guardian #1**

Parent/Guardian #1 Name (First and Last): \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Religion: \_\_\_\_\_

Marital Status:  Catholic Marriage     Civil Marriage     Single     Separated     Divorced     Widowed

Does Parent/Guardian #1 live at Family Street Address?  Yes     No

Cell/Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I would like to volunteer, please contact me:  Yes     No

**Parent/Guardian #2**

Parent/Guardian #2 Name (First and Last): \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Religion: \_\_\_\_\_

Marital Status:  Catholic Marriage     Civil Marriage     Single     Separated     Divorced     Widowed

Does Parent/Guardian #2 live at Family Street Address?  Yes     No

Cell/Work Phone: \_\_\_\_\_

Email: \_\_\_\_\_

I would like to volunteer, please contact me:  Yes     No

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