

Saint Mark R.C. Church
Office of Religious Education
500 Wigwam Lane
Stratford, CT 06614

2026-2027 Religious Education Registration Payment Voucher

Please make checks payable to St. Mark

Please mail or drop off this form with your payment.

Please enclose a **COPY** of your child's baptismal certificate if you are registering your child for the first time.

General Tuition (All Students):

Number of students (in-parish): ___ 1 (\$105) ___ 2 (\$185) ___ 3+ (\$240)
Number of students (out-of-parish): ___ 1 (\$155) ___ 2 (\$285) ___ 3+ (\$390)

Sacramental Fee (First Communion):

Number of students in Grade 2: ___ 1 (\$35) ___ 2 (\$70) ___ 3+ (\$105)

Sacramental Fee (Confirmation):

Number of students in Grade 7+: ___ 1 (\$75) ___ 2 (\$150) ___ 3+ (\$225)

Total enclosed: \$_____

Please print:

Student name(s): _____

Parent name: _____

Parent Contact info: _____

Office Use Only	
() Cash _____	Date: _____
() Check _____	() Entered PS
() Other _____	() Pmt. Recorded