



Sacred Heart Early Childhood Center

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Tel 352-588-4060 | Fax 352-588-4871
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License #C06PA0062

**2018 - 2019
PARISH MEMBER REGISTRATION FORM**

Family Information
Print Name(s) to be billed
Mailing Address
City, State, Zip
Telephone
Email Address

Student(s) Information	
Child's Name	DOB
Child's Name	DOB
Child's Name	DOB
Child's Name	DOB
Child's Name	DOB

Parent Certification

I agree to support the school in its curriculum, disciplinary actions, and fundraising activities. I further agree to attend parent meetings and to be involved in the ongoing activities at SHECC.

Signature of person to be billed

Date

Lucinda O'Quinn, Director

Certification by Sacred Heart Catholic Church

This certifies that the above family is currently a registered and supporting member of Sacred Heart Catholic Church.

Rev, Krzysztof Gazdowicz, Pastor

Date

To receive your 5% discount, please have Father Krzysztof Gazdowicz sign this form and return within 30 days.