

St. Christina Religious Education Registration Form 2011-2012



Tell Us About Your Family...

Are you new to the Religious Ed program at St. Christina Yes _____ No _____

Are you a registered & contributing St. Christina Parishioner? Yes _____ No _____

Family Name:	Home Phone:	Alternate Phone:
Street Address	City	Zip Code
Family e-mail address Required	Additional e-mail address	

Family Name:	Home Phone:	Alternate Phone:
Street Address	City	Zip Code
Family e-mail address	Additional e-mail address	

MOST PROGRAM COMMUNICATION IS DONE VIA EMAIL / PARISH WEBSITE UNLESS SPECIFIED HERE: I prefer to receive communication by regular mail _____

Please send communication to both parents _____

Parents Information:

Mothers Name _____	Maiden Name _____
Mother's Cell Phone# _____	Mother's Work # _____
Father's Name _____	Father's Work# _____
Father's Cell Phone# _____	

Parent's Marital Status: (Please circle)

MARRIED SEPARATED DIVORCED WIDOWED REMARRIED SINGLE

Student(s) Live With: (Please circle) BOTH PARENTS MOTHER FATHER GUARDIAN

CUSTODY ISSUES: If parents are divorced or separated, the R.E. program presumes that both parents have access to the children and to the children's records unless one parent can provide a document that he or she has the sole right.

Child's Name:

First: _____ Last: _____

Date of Birth: _____ Sex: ____M ____F

Born in what City_____

Childs school he/she attends_____ **2011-2012** _____

What is your Childs grade level 2011-2012:_____

Child's Name:

First: _____ Last: _____

Date of Birth: _____ Sex: ____M ____F

Childs school he /she attends_____

What is your Childs grade level 2011-2012:_____

Child's Name:

First: _____ Last: _____

Date of Birth: _____ Sex: ____M ____F

Born in what City_____

Childs school he / she attends_____

What is your Childs grade level 2011-2012:_____

Child's Name:

First: _____ Last: _____

Date of Birth: _____ Sex: ____M ____F

Born in what City_____

Childs school he/she attends_____

Child's Name:

First: _____ Last: _____

Date of Birth: _____ Sex: ___M___F

Born in what city _____

Childs school he/she attends _____

What is your Childs grade level 2011-2012 : _____

Medical Information:

Does your child have any special needs or medical conditions: _____

Any learning disabilities we should be aware of _____

L.D. _____ A.D.D. _____ A.D.H.D. _____

If more than one child is registering please give us the name that has a learning disability: _____

Sacraments Received:

Baptism (date): _____ Place: _____

Copy of Certificate needed if your child was **not** baptized at St Christina Church

Attached: Yes _____ No _____

Holy Communion (date): _____ Place: _____

Tell Us How You Can Help...

WE DEPEND HEAVILY ON THE HELP OF OUR PARENTS!

From the list below, please choose area(s) & check where we can count on you for help!

We will be in touch to coordinate our needs with your availability. Don't hesitate to call us with any questions!

_____ **Traffic Control:** We would need you to help at 8:00am and then back at 9:45am in front of school and on Homan Ave. If we got enough parents to help it may be a once a month commitment.

_____ **Hospitality:** (Provide and serve after monthly Children's Mass, open house, teacher appreciation breakfast).

_____ **Office Help:** Help Mrs. Carter during the week with typing letters, coping for the teachers, shopping for supplies.

St. Christina Parish staff/volunteers may photograph or videotape my child(ren) during Religious Ed programs / activities. Yes _____ No _____

We are required by the Archdiocese of Chicago to have in our program Protecting God's Children, this program teaches them how to be in a safe environment, it is age appropriate. Do we have your permission to talk about this in a classroom setting? Yes _____ No _____

Some classes throughout the school year may attend 8:30 a.m. St Christina Sunday Mass.
I give my child permission to attend Yes _____ No _____

TUITION & PROCESSING FEES Registration received after **September 11, 2011** will be charged an additional \$25.00 processing fee.

A \$30.00 fee will be added for any **NSF checks**.

I would like to sponsor a child in Religious Ed by helping with their tuition (please add this amount as a donation towards a needy family's tuition.) _____

Tuition Fee 2011-2012

# of Students Enrolled in Religious Ed	Fees \$200.00	Fees Paid \$	Check#	Cash \$
2 nd Child	\$100.00			
3 rd Child	\$75.00			
4 th Child	\$75.00			
RCIC	\$50.00			

Sacraments	Fees	Fees Paid	Check#	Cash
Communion Retreat	\$50.00			
Confirmation Retreat	\$50.00			

Subtotal of Tuition + Fees	\$
Registering after September 11, 2011... add a \$25.00 processing fee	\$
Total Due:	\$
Amount paid with registration:	\$

Balance Remaining:	\$
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Please make checks payable to: St. Christina Religious Ed

Religious Education classes will start on September 11, 2011