

ST. MICHAEL RELIGIOUS EDUCATION

317 W. Willow Avenue, Wheaton, Illinois 60187 (630) 682-3650 Fax (630) 690-3324

2016-2017 Family Registration

Preschool - Eighth Grade

Family Last Name Father's First Name Mother's First Name

Address City Zip Code Primary Phone

Alternate Phone #'s: Mom's cell Dad's cell

Is it best to reach you at your: Primary phone Mom's cell Dad's cell (Please circle one)

E-mail Address

Fill in below only if there is another parent who should receive mailings at an alternate address:

NAME E-MAIL

ADDRESS

CITY/STATE/ZIP

(If you are new to the parish, register with the Parish Office at 630-665-2250 or stop by the office at 310 S. Wheaton Avenue.)

Three identical registration boxes for children, each containing fields for Name, Grade, Date of Birth, Session Preference, Health Concerns, and a 'For office use only' box.

Are you new to St. Michael Religious Education? Yes or No
 Are you a registered member of St. Michael Church? Yes or No
 If not, in which church are you registered? _____
There is a \$100.00 out-of-parish fee for non-members.

**WE MUST HAVE A COPY OF ALL STUDENTS BAPTISMAL CERTIFICATE ON FILE
 IN THE RELIGIOUS EDUCATION OFFICE**

Please list below any child in **THIRD (3) grade or above** who **HAVE NOT** yet celebrated the following sacraments:

Name: _____ Grade: _____ Baptism _____ 1st Reconciliation _____ 1st Communion _____

Name: _____ Grade: _____ Baptism _____ 1st Reconciliation _____ 1st Communion _____

Name: _____ Grade: _____ Baptism _____ 1st Reconciliation _____ 1st Communion _____

NAME OF LOCAL PERSON TO CONTACT IF A PARENT IS NOT AVAILABLE

Name _____ Phone _____

Name _____ Phone _____

RELEASES

If emergency treatment is required your signature in the space provided below enables the Religious Education staff to exercise their own judgement to call 911 and allow a licensed medical professional to treat your child as necessary. Likewise, your signature below is not sufficient for the release of confidential information protected by Federal Law.

Parent/Guardian Signature _____ Date _____

I have read, and agree to abide by the policies stated in the 2016-2017 P3-5 Grade Religious Education Family Handbook/Junior High Religious Education Family Handbook which includes four links to documents listed under "Diocesan Information" in these handbooks. We are required by the diocese to provide you with these documents. The family handbooks can be found online at www.stmichaelcommunity.org or are available in the Religious Education office.

Parent/Guardian Signature _____ Date _____

Occasionally throughout the year video and still photographs may be taken of your child. Your signature constitutes permission for your child's participation in video and/or still photographs, which may be displayed on the St. Michael website and/or our Facebook page, throughout our buildings, and/or on our flyers. **No names** are ever used with the photos.

Parent/Guardian Signature _____ Date _____

Please fill in the appropriate total.

Tuition _____

Registration _____ **\$40.00**

Supply Fee _____
(\$75 for 2nd and 8th grades)

Volunteer Credit (\$ _____)

Total Due _____

Total Enclosed _____

_____ Yes, I would like to make 5 payments, October to March.

FOR OFFICE USE ONLY								
Date								
Amt.								
CK#								
Bal.								
Due								