

**ST. PHILIP THE APOSTLE RELIGIOUS EDUCATION PROGRAM  
FAMILY REGISTRATION FORM FOR 2022/2023 SCHOOL YEAR**

<b>S T E P 1</b>	Family Name _____ Dad's Name _____ Mom's Name _____
	Street Address _____ City/Zip Code _____
	Home Phone # _____ Dad's Cell # _____ Mom's Cell # _____
	Dad's Work # _____ Mom's Work # _____
	Dad's E-mail _____ Mom's E-mail _____

**Our primary form of communication with families will be the School Messenger automated message system.  
Please indicate which method of communication you prefer to receive:**

Phone Call to \_\_\_\_\_ E-mail to \_\_\_\_\_ @ \_\_\_\_\_ Text to \_\_\_\_\_

Please enter information for each of your children who will be attending the 2022/2023 religious education program classes or who will be participating in the home study program. **If you are registering a student who did not attend the religious education program last year, you will need to provide your child's baptismal certificate.**

<b>S T E P 2</b>	Returning (R) or New Student (N)	Last Name, First Name of Enrolling Student	Gender Male (M) or Female (F)	Birthdate MM/DD/YY	Grade in 2022/2023	Home Study (HS) or RE Classes (RE)
	R ___ or N ___		M ___ or F ___			HS ___ or RE ___
	R ___ or N ___		M ___ or F ___			HS ___ or RE ___
	R ___ or N ___		M ___ or F ___			HS ___ or RE ___
	R ___ or N ___		M ___ or F ___			HS ___ or RE ___

**METHOD OF PAYMENT** (office use only)

**FEE BREAKDOWN**

Date	Check (#) or Credit/ Debit Card (Visa, MC)	Amount	Balance	DATES & CONDITIONS	1 CHILD	2 CHILDREN	3+ CHILDREN	<b>S T E P 3  ↓  T h e n  t u r n  p a g e</b>
				Registered & entire fee paid by July 1, 2022	\$200	\$290	\$335	
				Registered by July 1, 2022; fees being paid in installments	\$220	\$310	\$355	
				Registered after July 1, 2022; fees paid in full at registration	\$250	\$340	\$385	
				Registered after July 1, 2022; fees being paid in installments.	\$270	\$360	\$405	
				<b>Sacramental Fees for Grades 2 &amp; 8</b>	<b>\$30</b> fee covers extra texts, retreats, meetings, and Sacramental supplies.			
				<b>TOTAL FEE DUE:</b> _____				
				___ We will pay the registration fee of \$100 and pay the remainder of the fee in installments.				
				___ We will pay the registration fee of \$100, and we would like the RE Director to call us to discuss our financial situation.				
				Signature: _____ Date: _____				

**Turn page over to fill out back of form →**

### MEDICAL EMERGENCY FORM UPDATE FOR 2022/2023

This form updates my original permission form for the child/children listed below who are registered in the RE Program to receive emergency treatment if I cannot be contacted while they are attending religious education classes at St. Philip the Apostle Parish. I agree to the terms of the original statement.

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

STEP 4

Please list children's names below and any issues that may impact on their religious education experience.

Child's Name	Medical problem, allergies, or learning disability

Please list an emergency name and phone number if parents cannot be reached at the phone numbers listed on the front of this form:

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

**PICTURES/VIDEO PERMISSION:** Pictures/videos of the religious education students may be taken during the school year for publicity or information purposes to advertise events in the parish. The pictures may be posted on the parish website, the parish bulletin boards, in parish publications and/or newspapers (local or diocesan). We assume your permission is given to use these photos for publicity and information purposes unless you notify the Religious Education Office by calling 630-543-1754. Please check that you understand this policy:

STEP 5

STEP 6

### ACKNOWLEDGEMENT OF RECEIPT OF DIOCESAN SAFE ENVIRONMENT PARENT RESOURCE INFORMATION FOR 2022/2023

I acknowledge that I have received the **Practical Advice for Parents on Preventing Child Sexual Abuse** flyer. This flyer and other literature offered by the diocese about standards of behavior may be read at <https://www.st-phil.org/re-program-registration.html> (Steps 8-10).

**Parent's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Interested in volunteering in the Religious Education Program?

- |   |  |
|---|--|
| <input type="checkbox"/> Grades K-5 Catechist (Wednesday, 4:15-5:45 p.m.) | <input type="checkbox"/> Summer Vacation Bible School                      |
| <input type="checkbox"/> Grades K-5 Classroom Aide (Wed., 4:15-5:45 p.m.) | <input type="checkbox"/> I have taken a Protecting God's Children class.   |
| <input type="checkbox"/> Grades 6-8 Catechist (Wednesday, 6:45-8:15 p.m.) | <input type="checkbox"/> I need to take a Protecting God's Children class. |
| <input type="checkbox"/> Grades 6-8 Classroom Aide (Wed., 6:45-8:15 p.m.) |  |
| <input type="checkbox"/> Office Manager ___ 4:15 p.m. or ___ 6:45 p.m.    | Name: _____  |
| <input type="checkbox"/> Door Security ___ 4:15 p.m. or ___ 6:45 p.m.     | Primary contact phone #: _____   |
| <input type="checkbox"/> Hospitality & Set-up/Clean-up at RE Events       | E-mail Address: _____ @ _____  |
| <input type="checkbox"/> Kitchen Ministry                                 | Comments: _____  |
| <input type="checkbox"/> Decorating for RE Events                         |  |

Please return your completed form (**front and back**) and payment to the Religious Education Office at 1233 W. Holtz Avenue in Addison, IL 60101. Checks should be made payable to St. Philip the Apostle RE Program. If you are registering a **new student**, please fill out a student information card and provide a copy of your child's baptismal certificate.