Date Registration	Received.	
Date Realitation	Received.	

ST. PHILIP THE APOSTLE RELIGIOUS EDUCATION PROGRAM FAMILY REGISTRATION FORM FOR 2023/2024 SCHOOL YEAR

	Family Name	Dad's Na	me	Mom's Name
S	Street Address _		City/Zip	o Code
T	Home Phone # _	Dad's Cell # _		Mom's Cell #
Ē	Dad's Work #		Mom's Work # _	
P	Dad's E-mail		Mom's E-mail _	
1	Our primary form	of communication with families will Please indicate which method of co		• •
	Phone Call to	E-mail to	@	Text to
		•		ng the 2023/2024 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.

S	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 2023/2024	Home Study (HS) or RE Classes (RE)
T F	R or N		M or F			HS or RE
P	R or N		M or F			HS or RE
2	R or N		M or F			HS or RE
	R or N		M or F			HS or RE

FEE BDEAKDOWN

METHOD	OF PAYMENT (office use of	only)		FEE BREAKDOWN						
Date	Check (#) or Credit/ Debit Card (Visa, MC)	Amount	Balance	DATES & CONDITIONS	1 CHILD	2 CHILDREN	3 + CHILDREN	S		
				Registered after July 1, 2023; fees paid in full at registration	\$250	\$340	\$385	P 3		
				Registered after July 1, 2023; fees being paid in installments.	\$270	\$360	\$405	T h e		
				Sacramental Fees for Grades 2 & 8	retre	e covers ex ats, meeting amental su	gs, and	n t u r		
				TOTAL FEE DUE: 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 nage	over to	fill out be	financial situation.		_ Date:				

	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:							
S	Please list children's names belo	Please list children's names below and any issues that may impact on their religious education experience.						
Ţ	Child's Name	Medical problem, allergies, or learning disability						
E P								
4								
	Please list an emergency no numbers listed on the front of	•	umber if parents cannot be reached at the phone					
	Name:	Relation	ship:	Phone #:				
the school year for publicity or information purposes to advertise events in the parish. The pictures be posted on the parish website, the parish bulletin boards, in parish publications and/or newspa (local or diocesan). We assume your permission is given to use these photos for publicity information purposes unless you notify the Religious Education Office by calling 630-543-1754. Pleached that you understand this policy:								
ACKNOWLEDGEMENT OF RECEIPT OF DIOCESAN SAFE ENVIRONMENT PARENT RESOURCE INFORMATION FOR 2023/2024 I acknowledge that I have received the Practical Advice for Parents on Preventing Child Sex Abuse flyer. This flyer and other literature offered by the diocese about standards of behavior makes the product of								
	Parent's Signature:			Date:				
Interested in volunteering in the Religious Education Program?								
	Grades K-5 Catechist (Wedr	nesday, 4:15-5:45 p.m.)	Summer Vacat	ion Bible School				
	Grades K-5 Classroom AideGrades 6-8 Catechist (WedrGrades 6-8 Classroom Aide	nesday, 6:45-8:15 p.m.)		Protecting God's Children c a Protecting God's Children				
	Office Manager 4:15 p.r Door Security 4:15 p.m. a							
	Hospitality & Set-up/Clean-u			none #:				
	Kitchen MinistryDecorating for RE Events			@				

MEDICAL EMERGENCY FORM UPDATE FOR 2023/2024

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.

STEP 5