

2018-2019 RELIGIOUS EDUCATION REGISTRATION FORM
HOLY FAMILY CATHOLIC CHURCH - 4401 HIGHCREST RD. ROCKFORD, IL 61107
(815)398-4280 WWW.HOLYFAMILYROCKFORD.ORG

Family Information

Family Name _____ Home Phone _____

Street Address _____ City and Zip Code _____

Parent E-mail address _____

Father _____ Cell Phone _____
(First Name, Last Name)

Mother _____ Cell Phone _____
(First Name, Last Name)

Mothers Maiden Name _____ Parents Religion-Father _____ Mother _____

Registered at Holy Family: Yes No Envelope Number _____

Children live with (please circle one) Both Parents Mother Father Other

If you are not the child(ren)'s parent, are you the legal guardian? YES NO (Proof of guardianship is required)

IN THE EVENT OF AN EMERGENCY, PLEASE PROVIDE INFORMATION FOR SOMEONE LOCAL OTHER THAN A PARENT OR GUARDIAN

Emergency Contact Person _____

Relationship _____

Phone Number _____

Class Information *(Fee Info on Back)*

Total number of children being registered: _____

Our family will register for:

_____ **Sunday morning classes**
(9:30 a.m. to 10:45 a.m.)
(No class last Sunday of the month)

(K- Eighth Grade, Sacramental Preparation)

MCFD/Online classes (\$55.00 fee)
Pastor/CRE approval required
(Not available for Sacramental years)

_____ **Homeschool – “Christ Our Life” Book**
Pastor/CRE approval required
(Not available for Sacramental years)

Year #3 – “Family Faith Morning”

This format is from the Diocese, and the trend has us moving towards total Family Faith Mornings. We continue to implement it slowly. The first Sunday of the month will be known as Family Faith Morning, where entire families will participate. We will all gather together for opening prayer, students and their parents will work on a religious family project, and then the teachers will take the students to their classrooms. The parents will stay to be encouraged by engaging topics and speakers. Then to close the morning, the students will rejoin their parents for closing prayer and blessing.

My Catholic Faith Delivered/Online & Homeschool (Book)

This is the curriculum for the 2017/18 school year where the student studies and participates in interactive activities online at home. It is what we are offering when a serious conflict exists that prevents the student from attending regularly scheduled Sunday morning classes. There is a flat \$55.00 fee for this service. **All interested families MUST speak to Barb Beckett to set this up. *This option is not available for sacramental years*** (i.e. First Communion, Confirmation).

First Student**Student Information**

Full Name _____ Male _____ Female _____ RE Grade in September _____
 (First name, Middle name, Last name)

School _____ Birth Date _____ City of Birth _____

Allergies: _____

Did this student attend a Religious Education program last year?

_____ Yes, at Holy Family Parish

Medications: _____

_____ Yes, elsewhere _____

_____ No (Name of Parish)

Special Needs (medical, learning or physical disabilities): _____

Sacramental Information: (If enrolled in our program last year, we don't need this information, as we have it on file.)

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Note: If any of your children were baptized outside of this parish or if your child will receive a sacrament this year (Reconciliation, Communion, Confirmation), and you have not already supplied us with a copy of their baptismal certificate, a copy **MUST** accompany this registration.

Second Student

Full Name _____ Male _____ Female _____ RE Grade in September _____
 (First name, Middle name, Last name)

School _____ Birth Date _____ City of Birth _____

Allergies: _____

Did this student attend a Religious Education program last year?

_____ Yes, at Holy Family Parish

Medications: _____

_____ Yes, elsewhere _____

_____ No (Name of Parish)

Special Needs (medical, learning or physical disabilities): _____

Sacramental Information: (If enrolled in our program last year, we don't need this information, as we have it on file.)

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Note: If any of your children were baptized outside of this parish or if your child will receive a sacrament this year (Reconciliation, Communion, Confirmation), and you have not already supplied us with a copy of their baptismal certificate, a copy **MUST** accompany this registration.

(Over)

Third Student**Student Information**

Full Name _____ Male _____ Female _____ RE Grade in September _____
 (First name, Middle name, Last name)

School _____ Birth Date _____ City of Birth _____

Allergies: _____

Did this student attend a Religious Education program last year?

_____ Yes, at Holy Family Parish

Medications: _____

_____ Yes, elsewhere _____

_____ No (Name of Parish)

Special Needs (medical, learning or physical disabilities): _____

Sacramental Information: (If enrolled in our program last year, we don't need this information, as we have it on file.)

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Note: If any of your children were baptized outside of this parish or if your child will receive a sacrament this year (Reconciliation, Communion, Confirmation), and you have not already supplied us with a copy of their baptismal certificate, a copy **MUST** accompany this registration.

Fourth Student

Full Name _____ Male _____ Female _____ RE Grade in September _____
 (First name, Middle name, Last name)

School _____ Birth Date _____ City of Birth _____

Allergies: _____

Did this student attend a Religious Education program last year?

_____ Yes, at Holy Family Parish

Medications: _____

_____ Yes, elsewhere _____

_____ No (Name of Parish)

Special Needs (medical, learning or physical disabilities): _____

Sacramental Information: (If enrolled in our program last year, we don't need this information, as we have it on file.)

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Note: If any of your children were baptized outside of this parish or if your child will receive a sacrament this year (Reconciliation, Communion, Confirmation), and you have not already supplied us with a copy of their baptismal certificate, a copy **MUST** accompany this registration.

PAYMENT INFORMATION

Early Bird Special for students registered and paid for before August 10, 2018

Registration fees are as follows:

Holy Family Registered Parishioners: \$130.00 for the first student, \$55.00 for each additional student
After August 10, 2018: \$150.00 for the first student

Non-Parishioners: \$160.00 for the first student, \$60.00 each additional student
After August 10, 2018: \$180 for the first student

Sacramental Fees: \$25 additional fee for First Reconciliation and/or First Communion this year
\$55 additional fee for Confirmation this year

My Catholic Faith Delivered On-line Classes are \$55.00 per student
"Christ Our Life" Homeschool/Book Classes are \$55.00 per student

No family tuition will exceed \$240.00 per family for parishioners or \$280.00 per family for non-parishioners

Sacramental fees, Homeschool/Online classes, and tuition AFTER August 10, 2018, are not included in tuition cap

New this year: I hereby give permission for any photography which include my child(ren) to be used in various parish communication and in the diocesan newspaper. Yes ___ No ___ Please initial ___

For office use only

Amount owed: _____

Payment amount: _____

Date of payment: _____

Check number: _____

Remaining balance: _____

Notes:

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____