

Religious Education Registration Form 2025-2026

Date///	Date:	/	/	/
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Choice of Monday ProgramFaith Formation of 6 - 7:15 p.m.Faith Formation Sunday 9 - 10:15 a.m.Early Childhood Sunday 9 - 10 a.m.Adaptive Program Sunday 9 - 10 a.m.Teen Seekers Wednesday 7 - 8:30 p.m.										
Student/s information (Please fill out a box for every child)										
Child 1 - Full Name: DOB://										
Gender: Male Female (As indicated on the birth certificate) Returning Student: Yes No										
Is the child relieving a sacrament this year?										
Did you turn in the following certificates?: Birth Certificate Baptism Certificate 1st Com. Certificate (Only check off the certificates that were turned in)										
Child 2 - Full Name: DOB:/										
(As indicated on the birth certificate) Gender: Male Female Returning Student: Yes No										
Is the child relieving a sacrament this year?										
Did you turn in the following certificates?: Birth Certificate Baptism Certificate 1st Com. Certificate (Only check off the certificates that were turned in)	te									
Child 3 - Full Name: DOB://										
(As indicated on the birth certificate) Gender: Male Female Returning Student: Yes No										
Is the child relieving a sacrament this year? Yes No Which one:										
Did you turn in the following certificates?: Birth Certificate Baptism Certificate 1st Com. Certificate (Only check off the certificates that were turned in)	te									
Child 4 - Full Name: DOB:/										
(As indicated on the birth certificate) Gender: Male Female Returning Student: Yes No										
Is the child relieving a sacrament this year? Yes No Which one:										
Did you turn in the following certificates?: Birth Certificate Baptism Certificate 1st Com. Certificate (Only check off the certificates that were turned in)	te									
Does your child have a medical condition, food of other allergy, or reading, sight, hearing, coordination of any other kind of problem or disability of which we should be aware? If yes, please describe below. Yes No Who:	r -									
Parent / Guardian 1: Phone Number: ()										
Parent / Guardian 2: Phone Number: ()										
Parental Status: Catholic Marriage Civil Marriage Separated Divorced Single Living Together	er									
Child(ren) address: Street City, State, Zip code										
Who does the child(ren) live with?: Both Parents Mother Father Other / Who:										
Are you a registered parishioner? Yes No Would you like to be registered? Yes No	_									
Emergency Contact: Ph.#: ()	_									

Religious	s Educatio	on pro	gram	agreement for:							
ı	Student(s) Name(s) I,, agree to follow the program expectations:										
	Parent / Gu				ee to follow the	program	i expectations:				
Educ											
	I understand that parents and sponsors must attend the meetings stipulated for them. Candidate's sponsor must be Catholic, over 16, and have had received the Sacraments of Initiation (Baptism, 1st Communion, Confirmation).										
	Failure to comply with these requirements could delay my child's reception of the Sacrament of 1st Communion and/or Sacrament of Confirmation.										
• In the event that I or the emergency contact cannot be reached; I give authorization if there is a need, to obtain medical services deemed necessary for my child .											
• I give permission to the parish to use the pictures of my child(ren) and to promote the Religious Ed Program. I have understood and agree with the above statements. Yes No											
Parent /	Parent / Guardian Signature:						Date:				
2025-2026 Enrollment Fees DEPOSIT NEEDED FOR REGISTRATION											
Guidelines					Fees		Amount				
1. Chec	k the fee	based	d of th	e number of child	lren you have.	1	Child: \$300				
2. Add sacramental preparation fee for each child who is							\$125 deposit due				
receiving a sacrament this year, if applicable.						2	Children: \$450				
3. Put in the correct amount for grand total and due now.							\$175 deposit due				
4. Chos	4. Chose to make a single or payment plan below.						3 or more children: \$550 \$200 deposit due				
5. Lastly, make deposit. You can make a payment in the office with a CC, Check, or Cash or you can make a							75 additional fee for each child eceiving a sacrament.				
payment online, though the <u>parish website</u> .					Early Childhood Program: \$60						
Sing	Single Payment Plan					\$30 deposit due					
	Due by		1/3 balance due by October 3, 2025				Adaptive Program: \$60				
December 4, 2025			1/3 balance due by December 4, 2025			\$30 deposit due (Sunday only)					
1/3 balance due by February 6, 2026						Grand Total					
						Due Now					
Office Use ONLY: Date Amount Check #, Cash, CC Payment taken by						If you have any questions, please Faith Formation office at (708) 35					
Date /	1	AIIIOU	iit	Check #, Cash, CC	Payment taken by		email Norma Hernandez				
/	/						(nhernandez@stcletusparish.com	n).			
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