

St. Francis of Assisi Religious Education 2150 Frieze Ave. Ann Arbor, MI 48104 734-821-2130
2017/2018 Religious Education Registration Form

Name/Address Information:

Father's Name: _____ Mother's Name: _____
First Name Last Name First Name Last Name

Does your child live with (please circle): Both parents; Mother; Father; Other: _____

If child lives with other than parents, Name of Guardian: _____

Home Address of child _____
Address City Zip

Father's (Guardian) Home Phone: _____ Cell Phone: _____ Work Phone: _____

Father's (Guardian) Email: _____
Regular correspondence sent to this email? If so, check box.

Mother's (Guardian) Home Phone: _____ Cell Phone: _____ Work Phone: _____

Mother's (Guardian) Email: _____
Regular correspondence sent to this email? If so, check box.

Parish Registered In: _____ Are you new to classes here? _____

Will you _____ (please circle): Teach/Co-Teach; Aid; Child Care; Special Events
Name Grade Preference:

Parents who teach (training is provided) for the year receive free tuition. Parents who aid for the year receive a tuition reduction.

For adult volunteers, have you taken the virtue training? Please circle: Yes No Not Sure

3. If a language other than English is spoken in the home, please list language(s) here: _____

Would you like language translation assistance? _____ If yes, please circle, for your child? For parent/guardian?

Session Information:

2. Check the appropriate boxes to indicate the sacraments your child has already received.

3. Check session preferences

1. Complete children's information.

Child's First & Last Name	Gender	School Child Attends	Birth date	2017/18 Grade	None	Catholic baptism or RCIA/profession of Faith	Reconciliation (Confession)	Communion (Eucharist)	Confirmation	Sunday Family Session A (preK-5 & 6-8)	Sunday Family Session B (preK-5 & 6-8)	Wed 6:30 K--5	Wed 6:30 6--8	Sunday Preschool (3 & 4yrs)

Tuition fees are found on back of sheet. Every child is welcome to classes— call for aid information if tuition poses a hardship for you.

If your child desires to be placed with a friend, please include the name of the friend below:

Requests will be honored, if made early, but are not guaranteed due to class size limitations.

Please fill out Additional Information and Emergency Form found on the back of this sheet.

1. Please explain any allergies your child has in the space below. Please include name of child and allergy:

2. Please explain any physical, social or learning disability needs that your child may have in the space below.
Name of Child/Special Needs:

Comments:

Photographs are sometimes taken of classes or events and used for articles on RE activities in the forum, canticle, and website. If you do *not* want to have your child included in these photos, please indicate your preference here:

Emergency Information:

If my child becomes ill or is injured while attending Religious Education classes, please call:

1. Name: _____ Relationship: _____ Phone: _____

2. Name: _____ Relationship: _____ Phone: _____

I authorize the staff of St. Francis to seek emergency medical care for my child as deemed appropriate. Our doctor of preference is: _____ Phone: _____

Our hospital preference is: _____

I understand that no event is without risk of injury and waive liability for events associated with RE classes and activities.

Signed: _____ Date: _____

Tuition: \$250/family. Includes children in Sunday Family Religious Education, Wednesday, and Sunday Preschool Classes.

Deposit: At least \$50 of the tuition is due at the time of registration. **Early discount: \$25 off tuition if full amount due is submitted by Sept 1.** (*Discounted* tuition for RE class Aides, Child Liturgy Leaders, & Toddlers & 2's Leaders is \$135)

Tuition Aid: Every child is welcome to Religious Education classes—please call for aid information if the tuition payment poses a hardship for you. Donations towards the Tuition Aid program are always welcome.

<i>Office Use Only</i>	Amount	Date	Check #	Balance
Total Tuition Due:				
Registration Date:				