

**HOLY INNOCENTS RELIGIOUS EDUCATION PROGRAM 2022 – 2023**

Last Name of **Child/ren**: \_\_\_\_\_ Registered with Church **Yes No**  
 Circle one

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PRIMARY** Phone for Communications: (\_\_\_\_) \_\_\_\_\_ Home phone (\_\_\_\_) \_\_\_\_\_

Mother: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
 First plus maiden name Mother's Cell Mother's Work Phone Number

Mother's e-mail: \_\_\_\_\_

Father: \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_  
 Name Father's Cell Father's Work Phone Number

Father's e-mail: \_\_\_\_\_

Mother's Religion \_\_\_\_\_ Father's Religion \_\_\_\_\_ Marital status of parents \_\_\_\_\_

**List ALL Children who will be in our 2022-2023 Program**

| First Name(s)         | M<br>F | Birthday | Name of<br>Public School<br>and Grade | Rel. Ed.<br>Grade in<br>Sept. | Grades 2-5, indicate day choice |                            | Saturdays as<br>available |
|-----------------------|--------|----------|---------------------------------------|-------------------------------|---------------------------------|----------------------------|---------------------------|
|                       |        |          |                                       |                               | Grade 6 - Monday evening        | Grade 7 - Tuesday evening  |                           |
|                       |        |          |                                       |                               |                                 |                            |                           |
|                       |        |          |                                       |                               |                                 |                            |                           |
|                       |        |          |                                       |                               |                                 |                            |                           |
| <b>New to program</b> |        |          |                                       |                               | 1 <sup>st</sup> choice day      | 2 <sup>nd</sup> choice day |                           |
|                       |        |          |                                       |                               |                                 |                            |                           |
|                       |        |          |                                       |                               |                                 |                            |                           |

**FIRST GRADE OR NEW STUDENTS TO PROGRAM**

**Submit a copy of their Baptismal certificate and any other sacraments received.**

**IF BAPTIZED AT HOLY INNOCENTS, BAPTISMAL DATE:** \_\_\_\_\_ (copy of certificate is not needed)

Registration: one Child \$350. / for two Children \$390. / for three or more Children \$430. \$ \_\_\_\_\_

Sacraments: Reconciliation/Communion add \$75.00 per child + \$ \_\_\_\_\_

Sacraments: Confirmation add \$100.00 per child + \$ \_\_\_\_\_

FAMILY **NOT** REGISTERED WITH HOLY INNOCENTS PARISH add \$100.00 + \$ \_\_\_\_\_

**Registrations will be accepted during the months of May, June, July and August.**

**Late Registrations will take place in September with an additional late fee of \$100.** + \$ \_\_\_\_\_

Total Amount Due = \$ \_\_\_\_\_

**-----DO NOT WRITE BELOW--- OFFICE USE ONLY -----**

Total Due \$ \_\_\_\_\_

Amount Paid \$ \_\_\_\_\_

Payment date: Mo \_\_\_\_\_/Day \_\_\_\_\_/Yr \_\_\_\_\_ Check # \_\_\_\_\_ Cash

**Last Name of Child/ren:** \_\_\_\_\_

**Special Needs/Medical Condition:** Are there any learning needs (ex: ADD, ADHD, or any learning accommodations in school) or any Medical Conditions/Allergies? Yes / No Does your child have an I.E.P. in school? Yes / No  
If yes, please let us know how best to work with your child.

Child's Name \_\_\_\_\_ Details: \_\_\_\_\_

Child's Name \_\_\_\_\_ Details: \_\_\_\_\_

**EMERGENCY CONTACTS:**

If parent/guardian cannot be reached in the event of non-emergency or illness which requires child to be picked up

Name: \_\_\_\_\_ Local Phone: \_\_\_\_\_

Cell: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Photo Release:** Sign only if you do not want photos of your child/ren used. I understand that pictures of my child may be posted in the Church, Social Hall, and/or Religious Education space.

*If you **DO NOT** want your Child's picture to be used, Sign here* \_\_\_\_\_

**(Do not use Photos of my Child / Children)**

**Safe Environment:** Age and grade appropriate Safe Environment Lessons are taught each year in Religious Education. **If you wish to opt out please sign.** \_\_\_\_\_

**(Do not teach the Safe Environment lesson).**

*VOLUNTEERS*

**I WOULD LIKE TO OFFER MY SERVICES IN THE FOLLOWING WAY / CIRCLE CHOICE:**

|                               |     |     |     |       |     |         |         |         |
|-------------------------------|-----|-----|-----|-------|-----|---------|---------|---------|
| _____ Catechist (Teacher)     | Mon | Tue | Wed | Thurs | Sat | Mon Eve | Tue Eve | Wed Eve |
| _____ Catechist Assistant     | Mon | Tue | Wed | Thurs | Sat | Mon Eve | Tue Eve | Wed Eve |
| _____ Hall Monitor            | Mon | Tue | Wed | Thurs | Sat | Mon Eve | Tue Eve | Wed Eve |
| _____ Substitute              | Mon | Tue | Wed | Thurs | Sat | Mon Eve | Tue Eve | Wed Eve |
| _____ Principal (sit at desk) | Mon | Tue | Wed | Thurs | Sat | Mon Eve | Tue Eve | Wed Eve |

Please indicate Grade requesting \_\_\_\_\_

Volunteers:

E-mail \_\_\_\_\_ phone (\_\_\_\_\_) \_\_\_\_\_

- All Volunteers will be asked to complete an Application, Background Check, and participate in Safe Environment Training. Background Checks are renewed every six years.
- Catechists (teachers) are provided with: Archdiocesan Guidelines for Catechesis, Catechist Manual, Resources and Program Calendar.
- Catechists (teachers) are entitled to free Registration. Must pay Sacrament Fees
- Assistants, Principals, and Hall Monitors are entitled to one-half Registration fee. Must pay Sacrament Fee