

Immaculate Conception Parish, De Pere WI

Faith Formation Registration Form 2021-22

FAMILY/ GUARDIAN NAME: _____

ADDRESS: _____ ZIP: _____

HOME PHONE NO: _____

FATHER/GUARDIAN'S NAME: _____

ADDRESS: _____ ZIP: _____

Religion: _____ Marriage Status: _____

Occupation: _____ Cell Phone: _____

MOTHER/GUARDIAN'S NAME: _____

ADDRESS: _____ ZIP: _____

Religion: _____ Marriage Status: _____

Occupation: _____ Cell Phone: _____

INFORMATION SHOULD BE SENT TO: Father Mother Guardian All Other: _____

Email address(s) to be used for newsletters, reminders, class cancellations/updates

(REQUIRED): _____

Child's full name	Male or Female	Grade	Date of Birth	Baptism Date & Place if not IC	First Eucharist Yes/No

School(s) your child(ren) attend: _____

Emergency contact: _____ Phone: _____

If emergency treatment is required, and the parents/guardians cannot be reached immediately, your signature in the space provided below empowers parish authorities to exercise their own judgment to

transport your child to a hospital emergency room. This is a general authorization and is not sufficient for the release of confidential information protected by Federal Law.

Parent/Guardian signature: _____ Date: _____

Do/does your child(ren) have any learning, physical, or developmental challenges? If so, please list specific information about those special needs.

Name(s): _____

Nature of disability: _____

Name of any children who have allergies AND type of allergy:

Name: _____ Type: _____

Name of any children who are on medication AND type of medication:

Name: _____ Type: _____

Media Release: Do we have your permission to take your child(ren)'s picture during the year for display in the hallway, bulletin, website, etc. of different activities that they are involved in? Yes No

Please check the area(s) your family would like to VOLUNTEER in to help the Faith Formation Program (Tuition for children of catechists is waived):

_____ Catechist

_____ Classroom Aide (Grade preferred: _____)

_____ Substitute Catechist

_____ General Volunteer on Wednesday nights (help w/ art projects, copying/office work, etc.)

IMMACULATE CONCEPTION FAITH FORMATION TUITION PLAN

Fees - Parishioners:

One Student = \$50.00 - Two Students = \$100.00 -Three (or more) Students = \$150.00

*** 2nd Grade and Confirmation students will be charged an additional \$10.00 sacrament fee ***

Fees - Non Parishioners: One Student = \$100.00 - Two Students = \$200.00 -Three (or more) = \$300.00

Please make your check or money order payable to Immaculate Conception. Tuition payments may be made in several ways. Please indicate your choice below:

_____ Full Tuition payment due at registration \$ _____

_____ Monthly payments of: \$ _____

_____ First Half Tuition payment due at registration \$ _____

*** Second Half Tuition Payment due February 1, 2022 ***

If any of these fees create a financial burden, please contact the parish Office at 869-2244. Payment plans and tuition assistance are available. No one shall be denied a Catholic Christian Education based solely on his/her ability to pay tuition. All children must be registered PRIOR to attending classes.

Thank you!

Parent/Guardian Signature: _____ Date: _____