

SECTION H Parent Volunteer Sign-Up (ALL VOLUNTEERS RECEIVE A DISCOUNT!)

It’s hard to come forward the first time. Don’t be intimidated because no one knows it all. This is a good place to meet other parents. Check out the job descriptions on the previous page or the parish website and sign up below. Maybe there’s a spot waiting for you!

| Position—Please Check All Possibilities | Mom | Dad |
|--|-----|-----|
| Catechist (RE teacher) <i>training available</i> | | |
| Catechist Aide or Apprentice | | |
| Monitor (6-7 needed per session) | | |
| Sacramental and Event Planning Team | | |
| Fundraising Team | | |
| <i>I have attended a Protecting God’s Children Workshop.</i> | | |

SECTION I Checklist and Signatures

Please be sure to read all contents and check the following sections for completion:

| | |
|--|--|
| <input type="checkbox"/> Section A Family Information | <input type="checkbox"/> Section E Health Information |
| <input type="checkbox"/> Section B Session Request | <input type="checkbox"/> Section F or G Tuition & Volunteer Descriptions |
| <input type="checkbox"/> Section C Sacramental Background | <input type="checkbox"/> Section H Parent Volunteer Sign Up |
| <input type="checkbox"/> Section D Videotaping & Still Photographs | <input type="checkbox"/> Section I Checklist and Signatures |

Students registering for Confirmation Preparation Year I and Year II must also enclose the following:

| | |
|---|--|
| <input type="checkbox"/> Year I: Nicene Creed Reflection Paper* | <input type="checkbox"/> Year II: Patron Saint Reflection Paper* |
| | <input type="checkbox"/> Year II: Sponsor Information Sheet* |

*Forms can be found on our website

☐ *I understand and agree that all this registration information is accurate.*

Choose payment method:

- ☐ Drop Box ~ Cash/Check is enclosed with registration
☐ Mail In ~ Check (add RE Tuition in memo) enclosed with registration
☐ In Person ~ Check/Cash is enclosed with registration

Parent Signature _____

Date _____

ONCE YOUR REGISTRATION IS PROCESSED AND WE HAVE RECEIVED PAYMENT AND ANY ADDITIONAL PAPERWORK, i.e. Sacramental and/or Confirmation Preparation paperwork, an email confirmation will be sent to you.
*****Incomplete registration will be returned*****

PARISH OFFICE USE ONLY Do Not Write in this Section

| | | | |
|--------------------|-------------------|---|--------------|
| Date/Confirmation# | Total Tuition Due | Deposit Amount | Check #/Cash |
| Certificates | Creed Paper | Saint Paper <input type="checkbox"/> Sponsor Form <input type="checkbox"/> | Return By |

St. Ann Religious Education 2023-2024 Registration

The time is here to start planning for the next catechetical season. This form includes what you will need to register your children for 2023-2024. Please be sure to read and complete every section to avoid delaying your registration. Completed registrations with full or minimum payments can be dropped in the mailbox, dropped off at the parish office, or mailed back to us. If you are taking advantage of the payment plan option, please sign the form and return with your down payment. Please make sure if you have a Year I or Year II Confirmation student that they complete the necessary paperwork and include it with your registration. Call 815.467.6962 ext. 5 with any questions.

No session requests will be taken by phone or fax.

Check out more details about our program and events!

www.stannchannahon.org

SECTION A Family Information

Family Name: _____

Family Address: _____

City _____

ST _____

Zip _____

Family e-mail address _____

Who do children live with?

- | | |
|--|---|
| <input type="checkbox"/> Father and Mother | <input type="checkbox"/> Mother and Spouse |
| <input type="checkbox"/> Father and Spouse | <input type="checkbox"/> Mother alone |
| <input type="checkbox"/> Father alone | <input type="checkbox"/> Other/Relationship _____ |

Father’s Name: _____

Father’s Phone: _____

Home

Cell Phone

Other Phone

Father’s Email: _____

Mother’s Name: _____

Mother’s Phone: _____

Home

Cell Phone

Other Phone

Mother’s Email: _____

Emergency Contact: _____

Relationship

Cell Phone

Other Phone

SECTION BSession Request

Session requests are filled first come, first served and based on availability.

For Grades 1-6, please indicate your 1st, 2nd and 3rd choice for session times.

Session A (Gr. 1-6)Wednesday4:00 p.m. - 5:15 p.m.

Session B (Gr. 1-6)Wednesday6:00 p.m. - 7:15 p.m.

Session C (Gr. 1-6)Thursday5:00 p.m. - 6:15 p.m.

Confirmation PrepSunday10:00 a.m. Mass - 1:00 p.m.

| Child's Name Last/First | 2022-23 School Grade | Gr 1-6 Session A 4:00 PM Wed. | Gr 1-6 Session B 6:00 PM Wed. | Gr 1-6 Session C 5:00 PM Thur. | Year 1 Conf. Prep 10:00 AM Sun. | Year II Conf. Prep 10:00 AM Sun. |
|----------------------------|----------------------------|--|--|---|--|---|
| Example: Suzi Smith | 5 | 3 | 1 | 2 | | |
| 1. | | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |

SECTION CSacramental Background

Has Your Child Received Sacraments? Please check all that apply.
If your child is new to the program, for a complete registration,
please include a COPY of all sacramental certificates.

| Name of Student | Grade | Baptism St. Ann / Other | Reconciliation St. Ann / Other | Eucharist St. Ann / Other |
|---------------------|-------|----------------------------|-----------------------------------|------------------------------|
| Example: Suzi Smith | 5 | XList Church | XList Church | XList Church |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |
| 4. | | | | |

SECTION DVideotaping and Still Photographs

Videos and still photographs may be taken throughout the year. We are asking for your permission for your child's permission for your child's participation in the videotape and/or still photographs, which may be used for future promotional efforts, including St. Ann website and other media. Please check below.

I grant permission for my child (ren) to be videotaped or photographed

I decline permission to have my child (ren) to be videotaped or photographed

SECTION EHealth Information (families are asked to update annually)

| Please complete for each child | Allergies | Heath Issues | Special Needs | Please initial below if your child does NOT have any allergies, health issues or special needs. |
|--------------------------------|-----------|--------------|---------------|---|
| Name of Student | Yes | Yes | Yes | |
| | | | | |
| Please describe: | | | | |
| How should we respond? | | | | |
| Contact Name & Phone # | | | | |

| Please complete for each child | Allergies | Heath Issues | Special Needs | Please initial below if your child does NOT have any allergies, health issues or special needs. |
|--------------------------------|-----------|--------------|---------------|---|
| Name of Student | Yes | Yes | Yes | |
| | | | | |
| Please describe: | | | | |
| How should we respond? | | | | |
| Contact Name & Phone # | | | | |

| Please complete for each child | Allergies | Heath Issues | Special Needs | Please initial below if your child does NOT have any allergies, health issues or special needs. |
|--------------------------------|-----------|--------------|---------------|---|
| Name of Student | Yes | Yes | Yes | |
| | | | | |
| Please describe: | | | | |
| How should we respond? | | | | |
| Contact Name & Phone # | | | | |

| Please complete for each child | Allergies | Heath Issues | Special Needs | Please initial below if your child does NOT have any allergies, health issues or special needs. |
|--------------------------------|-----------|--------------|---------------|---|
| Name of Student | Yes | Yes | Yes | |
| | | | | |
| Please describe: | | | | |
| How should we respond? | | | | |
| Contact Name & Phone # | | | | |

Acknowledge of Receipt

**DUE on or before
MONDAY, OCTOBER 23rd, 2023**

All parents are asked to sign this page and return it no later than Monday, October 23, 2023 Parental signature(s) indicate understanding of and agreement with all policies and procedures. This page may be mailed to St. Ann Parish, dropped at the office, or placed in the drop box at the administration door.

I have read the on-line copy of the:

_____ 2023-2024 Family Handbook that also includes:
Diocese of Joliet Practical Advice for Parents On Preventing Child Sexual Abuse;
Parent Guide: Internet Safety for Children and Teens; Sexuality, Chastity and our
Youth: A Challenge for Parents Today; and Understanding and Preventing Child
Sexual Abuse.

Parent Signature _____

Date _____

Parent Signature _____

Date _____

Please have your children sign below to indicate they are familiar with the contents of the Family Handbook

| <u>Name of Child</u> | <u>Grade</u> | <u>Child Signature for Handbook</u> |
|----------------------|--------------|-------------------------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |