

Light of the World Religious Education Registration

<i>Family Last Name</i>		<i>Parent Email</i>	
<i>Mailing Address</i>		<i>City, State, Zip</i>	
Father's Name	Cell #	Mother's Name	Cell #
I can help with... <input type="checkbox"/> Teach <input type="checkbox"/> Substitute Teach <input type="checkbox"/> Classroom Helper <input type="checkbox"/> Monitor Halls <input type="checkbox"/> Help at special events <input type="checkbox"/> Teach Sunday School <input type="checkbox"/> Baking bars/cookies when needed		I can help with... <input type="checkbox"/> Teach <input type="checkbox"/> Substitute Teach <input type="checkbox"/> Classroom Helper <input type="checkbox"/> Monitor Halls <input type="checkbox"/> Help at special events <input type="checkbox"/> Teach Sunday School <input type="checkbox"/> Baking bars/cookies when needed	

Student Information:

First and Last Name	Birthday	Gender	Grade (Fall 2019)	Sacraments Received (Circle)
_____	_____	M F	_____	Baptism Eucharist Reconciliation
_____	_____	M F	_____	Baptism Eucharist Reconciliation
_____	_____	M F	_____	Baptism Eucharist Reconciliation
_____	_____	M F	_____	Baptism Eucharist Reconciliation
_____	_____	M F	_____	Baptism Eucharist Reconciliation
_____	_____	M F	_____	Baptism Eucharist Reconciliation

Please indicate if any child has serious medical conditions we should be aware of for their safety:

Religious Education classes will meet at St. Annes Church at the following times (please check all that apply):

- 1-6th Grade 3:10-4:30pm
- 7-12th Grade 7-8pm
- OR Catholic School: _____

In the event of an emergency and you, the parent/guardian, can not be reached please list who you prefer us to contact.

Emergency Contact: _____ Phone: _____ Relationship: _____

Tuition-We would appreciate all fees being paid by December 1, 2019. Please call if you have and questions, are unable to pay by this time, or have would like a payment plan set up.

- \$40 per student (Grade K-12, except 2 & 11)
- \$45 per Grade (2 & 12)
- \$55 out of parish cluster
- \$100 family max. (If you teach, you do not pay tuition.) **(OVER)**

Light of the World Area Faith Community

**950 North Street
P.O. Box 239
Wabasso, MN 56293**

Photo/Video Release Form for 2019-2020 School Year

TO WHOM IT MAY CONCERN:

I hereby give permission for my child(ren), stated below, to be photographed or videotaped at LOW Religious Education. I realize that the photo may be published in the newspaper, a magazine, or other publication. The video may be used for educational or informational purposes regarding the programs or curriculum at LOW Religious Education.

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Child's Name _____ Grade _____

Signed _____

Date _____

PARENT/LEGAL GUARDIAN PERMISSION FORM

My child or children have permission to be involved in the Religious Education programs at LOW Parish, under the direction of its leadership.

If a medical emergency occurs, I hereby give permission to transport my child or children to a hospital for emergency medical or surgical treatment. I understand I will be notified as soon as possible for any emergency concerning my child(ren).

Parent/Guardian Signature

Date

Family Medical Information:

Family Doctor: _____ Phone Number: _____

**Please either mail or bring this registration form to Katie Prokosch at St. Anne Catholic Church.
Registrations are due by Sunday September 15, 2019.**