Immaculate Conception Catholic Church

Religious Education Registration 2025/2026

<u>Wednesday Evenings</u> – 1st – 8th Grade 6:00pm-7:30pm in the Parish Center Building.

For Office Use C	<u>Only</u>	Intake Initials:
Tuition:		
Total:		
Check #	Cash	Online
Balance:		Date:

Family LAST Name						
Family Address						
<u> </u>						
		City	State	Zip Code		
Family is registered and are a	ctive parishioners of Immacula	ate Conception Catholic Church	<u>?</u>			
VEC NO Envelope #	If NO subara ia va	····· f-·····lly maniatawad2				
YES OF NO Envelope #	if NO, where is yo	our family registered?				
Father's Name	Phone Number	Email Address		Religion		
<u>- 441101 C 11311110</u>	<u></u>					
Mother's Name	Phone Number	Email Address		Religion		
Mother 5 Name	r none Humber	Liliali Addiess		Kengion		
				_		
Emergency Contact, other tha	<u>an parent/guardian:</u>					
Name:	ame: Phone Number:					
Tunio.						

Tuition 2025/2026 One Child \$60.00 Two Children \$90.00 Three or more children \$120.00 Tuition may be paid in cash (exact amount), check (payable) to Immaculate Conception, or online – via WeShare. Please see the parish website.

NEW FAMILIES... Please submit a copy of each child's Baptismal Certificate.

	Name of Child	Gender	<u>Age</u>	<u>Birthdate</u>	Grade in School	Special Needs OR Concerns	Allergies OR Medical Conditions	Sacraments Completed	Child attended Religious Education class last year?
1.								Baptism Eucharist Confirmation	YES or NO
2.								Baptism Eucharist Confirmation	YES or NO
3.								Baptism Eucharist Confirmation	YES or NO
4.								Baptism Eucharist Confirmation	YES or NO

Medical Treatment Release					
Should the need arise to seek emergency medical assistance, treatment and/or transport for my child/children, and Immaculate Conception Catholic Church is unable to reach myself or the other parent/guardian, or emergency contact, I agree to authorize said emergency medical assistance, treatment, and/or transport. and agree to pay for all expenses incurred and associated with said emergency medical assistance, treatment, and/or transport.					
Parent/Guardian: Printed Name	Signature	Date			
Media Consent					
Immaculate Conception Catholic Church uses correspondence and social media with parishioners, and the community, in the form of a parish bulletin, parish website, flyers, Facebook, etc. Parents/Guardians are given the option to allow the use of their children's photo/video, or class work, without names, for these purposes.					
YES, I give media consent.					
Parent/Guardian: Printed Name	Signature	Date			
NO, I do not give media consent.					
Parent/Guardian:					
Printed Name	Signature	Date			