

**ST. BARBARA PARISH
RELIGIOUS EDUCATION PROGRAM
2017-2018 Registration Form**

PLEASE PRINT

Family Name _____ Registered at St. Barbara Parish: YES NO NOT SURE

Father's Full Name _____

Mother's Full Name: _____ Maiden Name _____

Address _____

Contact Email (**PLEASE PRINT CLEARLY**) _____

Home Phone _____ Cell Phone No. _____

Primary Family Contact _____

Emergency Contact (other than parent) _____

Relationship to Student _____ Phone Number _____

A class on Child Protection/Child Safety will be offered to all grades. If you DO NOT want your child to attend/participate, please Initial below:

I DO NOT want my child/children to participate in the Child Protection/Child Safety class _____

VOLUNTEER SUPPORT NEEDED.

The assistance from parents and guardians of our students is important to the success of our Religious Education Program. To assist us, we are asking that you consider taking an active role in the teaching of our faith or by assisting in one of the roles listed below. Please indicate any roles you are interested in.

_____ Catechist (Grade _____)

_____ Substitute

_____ Grade Coordinator

_____ One Time Special Events

_____ Christmas Pageant

_____ G2 First Penance Retreat

_____ G5 & 6 Stations of the Cross

Please register the following students:

<u>Child's Name</u>	<u>Grade</u>	<u>Child's D.O.B</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

PAYMENT INFORMATION

**1 child - \$75, 2 Children - \$150, 3 or more children - \$180
(Additional Sacramental Fee of \$50 for grades 2 & 10)**

Tuition \$ _____ Sacramental Fee \$ _____ AMOUNT ENCLOSED \$ _____

PERTINENT INFORMATION ABOUT YOUR CHILD(REN)

Please indicate if your child has a food allergy, learning needs, or other pertinent information that may be helpful to us in assisting your child(ren) during their participation in our program.

Comments: _____

I wish to enroll my child(ren) in St. Barbara's Parish Religious Education Program and agree to pay any associated fees with the submission of this registration form. By registering in our program, you grant permission for you child(ren) to be photographed or their image recorded for print or electronic use. You agree that St. Barbara Parish may use these photographs/images with or without their names and for any lawful purpose, including print or online publications, presentations, websites, and social media. It is your responsibility to inform St. Barbara Parish in writing should you no longer wish to authorize the above uses. This permission is only necessary for private events and situations, as it is not required for public events such as Mass and collations.

Signature of Parent/Guardian

Date

***Please return completed form with payment to:
St. Barbara Parish
138 Cambridge Road
Woburn, MA 01801***

Attention: Religious Education