

2013-2014 RELIGIOUS EDUCATION REGISTRATION FORM
ST. RITA PARISH 770 W. OLD INDIAN TRAIL, AURORA, IL 60506 630-892-9507

Family Name _____ Home Phone _____

Street Address _____ City and Zip Code _____

Parent E-mail address _____

Father _____ Cell Phone _____
 (Last Name, First Name)

Mother _____ Cell Phone _____
 (Last Name, First Name, Maiden Name)

Emergency Contact _____ Phone _____
 (Full Name)

Children live with (please circle one) Both Parents Mother Father Other
 If you are not the child(ren)'s parent, are you the legal guardian? YES NO (*Proof of guardianship is required*)

Total number of children
 being registered: _____

CLASSROOM TUITION SCHEDULES

Our family will register for:

_____ Sunday morning classes
 English
 (9:00 to 10:05)
*(Preschool through Eighth Grade,
 and Sacramental Preparation)*

_____ Sunday morning classes
 Spanish
 (10:45 to 11:50)
*(Preschool through Sixth Grade,
 and Sacramental Preparation)*

For registrations received before September 1, 2013:

1 child: \$125.00
 2 children: \$175.00
 3 or more children: \$200.00

For registrations received between September 1 and the first day of class:

1 child: \$135.00
 2 children: \$185.00
 3 or more children: \$225.00

For registrations received between the first day of class and October 13th:

1 child: \$150.00
 2 children: \$205.00
 3 or more children: \$235.00

**No registrations will be accepted after Sunday, October 13, 2013
 Families with outstanding balances from last year must meet with Rae
 Eigenhauser before this year's registration will be accepted.*

For office use only:

Payment amount: _____

Date of payment: _____

Check number: _____

1st Communion fee: _____

Notes

- If your child will receive a sacrament this year, (Reconciliation and Communion) a copy of his or her Baptismal certificate **MUST** accompany this registration.

First Student

Full Name _____
 (Last name, First name, Middle Name)

Male _____ Female _____ Grade in September _____

Birth Date _____ City of Birth _____

Did this student attend a Religious Education program last year?

_____ Yes, at St. Rita Parish
 _____ Yes, elsewhere _____
 _____ No (Name of Parish)

Sacramental Information

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Special needs: _____

Second Student

Full Name _____
 (Last name, First Name, Middle name)

Male _____ Female _____ Grade in September _____

Birth Date _____ City of Birth _____

Did this student attend a Religious Education program last year?

_____ Yes, at St. Rita Parish
 _____ Yes, elsewhere _____
 _____ No (Name of Parish)

Sacramental Information

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Special needs: _____

Third Student

Full Name _____
 (Last name, First name, Middle Name)

Male _____ Female _____ Grade in September _____

Birth Date _____ City of Birth _____

Did this student attend a Religious Education program last year?

_____ Yes, at St. Rita Parish
 _____ Yes, elsewhere _____
 _____ No (Name of Parish)

Sacramental Information

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Special needs: _____

Fourth Student

Full Name _____
 (Last name, First name, Middle Name)

Male _____ Female _____ Grade in September _____

Birth Date _____ City of Birth _____

Did this student attend a Religious Education program last year?

_____ Yes, at St. Rita Parish
 _____ Yes, elsewhere _____
 _____ No (Name of Parish)

Sacramental Information

Baptism _____
 (Approximate date, city and parish)

First Reconciliation _____
 (Approximate date, city and parish)

First Holy Communion _____
 (Approximate date, city and parish)

Confirmation _____
 (Approximate date, city and parish)

Special needs: _____