

This Signature Sign-off Sheet Must be returned with your 2023-2024 registration form



Diocese of Joliet
Office of Child and Youth Protection
16555 Weber Rd
Crest Hill, Illinois 60403

Family Name _____

Family ID# _____

ACKNOWLEDGMENT

This is to acknowledge that I have been made aware that these forms are available to me to read on our parish Website
<http://www.smip.org/diocese-of-joliet-forms/>

_____ Parent Guide: *Practical Advice for Parents on Preventing Child Sexual Abuse*

I understand that I am responsible to become familiar with the contents of the above document. I agree to abide by and to conduct myself in complete accord to its contents.

Print Name _____

➤ Signature _____ Date _____

Registration Checklist:

Please be sure to include all of the following with your 2023-2024 registration packet

Completed ✓

_____ Above **Acknowledgement Form** signed and dated

_____ Complete **Registration** form which includes all required signatures

_____ Completed **Automatic Tuition Deduction Form** with signature or payment in full

Please be sure to include a copy of your child's Baptismal Certificate if you are new to the program

(Any registration form submitted incompletely will be returned in the mail)



Date _____
 Baptism _____
 PMT _____
 Conf Copy _____ SMU

Family Contact Information (one email is required) Family ID _____ (office will complete)

Family Last Name _____
 Mother's Name _____ Phone _____ Email _____
 Father's Name _____ Phone _____ Email _____
 Home Address _____ City _____ Zip _____ Public School _____

Student Information

Child 1: Name _____ Birthdate _____
 Grade in the fall _____ Last grade of RE completed _____ Special Learning Needs _____
 Session Choice (see below) #1 _____ #2 _____ #3 _____
Sacrament History (Please list the date and parish where your child received the Sacrament. Copy of baptismal certificate must be on file)
 Baptism _____ Reconciliation _____ Communion _____

RE Phone 815.436.4501

Child 2: Name _____ Birthdate _____
 Grade in the fall _____ Last grade of RE completed _____ Special Learning Needs _____
 Session Choice (see below) #1 _____ #2 _____ #3 _____
Sacrament History (Please list the date and parish where your child received the Sacrament. Copy of baptismal certificate must be on file)
 Baptism _____ Reconciliation _____ Communion _____

2023-2024 School Year Registration

Child 3: Name _____ Birthdate _____
 Grade in the fall _____ Last grade of RE completed _____ Special Learning Needs _____
 Session Choice (see below) #1 _____ #2 _____ #3 _____
Sacrament History (Please list the date and parish where your child received the Sacrament. Copy of baptismal certificate must be on file)
 Baptism _____ Reconciliation _____ Communion _____

Child 4: Name _____ Birthdate _____
 Grade in the fall _____ Last grade of RE completed _____ Special Learning Needs _____
 Session Choice (see below) #1 _____ #2 _____ #3 _____
Sacrament History (Please list the date and parish where your child received the Sacrament. Copy of baptismal certificate must be on file)
 Baptism _____ Reconciliation _____ Communion _____

Confirmation Phone 815.436.2861

RE K-6 Session Choices

- Tuesday 5:15—6:30 p.m. (Tue)
- Wednesday 6:15—7:30 p.m. (Wed) (NO Kindergarten)
- Thursday 5:15—6:30 p.m. (Thur)
- Saturday 8:45—10:15 a.m. (Sat)—FAITH BASICS ONLY
- Home School is available for RE except for Grade 2 (HS)

RE (K-6) Faith Basics—Saturday Only
 Students entering the 3rd—6th grade who have **no** previous religious education will be placed in our Faith Basics Program. It is a 2 year program that will prepare the students for their Sacraments of First Reconciliation and First Communion

Confirmation Session Choices

- Monday 7:00—8:30 p.m. Year 1
- Thursday 7:00—8:30 p.m. Year 2
- High School —TBD

Financial

No family will be turned away because of financial need. Please contact us for information on financial assistance if needed.

Tuition

1 Child\$325

2 children\$445

3+ Children\$550

Other Fees

❖ Sacrament Fee \$50 per student/per Sacrament

(First Communion and Confirmation second year)

Tuition and fees workspace:

Family Tuition _____

Sacrament Fee _____

Total Tuition and Fees _____

Any past due balances must be reconciled at registration.

Payment Options (Check your choice)

A) Pay in full at registration

B) Pay via 2 Automatic deductions in June and November (be sure to complete the Auto Deduction Form)

C) I will request financial assistance via the FACTS Program (More info is available on the FACTS form in this packet)

Medical

Please list out any medications or other medical issues we should be aware of for your child's safety. If not applicable please indicate N/A.

Name /Issue _____

Name /Issue _____

Name /Issue _____

Name /Issue _____

Medical Permission Form

I grant permission for the administration of First Aid to my child(ren), by the people in charge of Religious Education Grades K-6 and Confirmation Program in the event that I am not in attendance, as their judgment deems advisable, and to make the necessary referrals to qualified physicians for the treatment of illness or accidents of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In the case of a medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to administer proper treatment.

Emergency Contact Name (*not the parents*) _____

Relationship to student _____

Emergency Contact Phone # _____

Spiritual

I understand my responsibilities both as a Catholic and a parent to attend Mass on a weekly basis. I am making a commitment to maintain our weekly attendance at Mass, or if we are not currently doing so, to strive to attend Mass regularly with my children and prayerfully seek ways to support St. Mary Immaculate Parish with our time, talent and treasure.

In signing my name below I acknowledge all sections of this registration form that include the Diocesan Sign off sheet, Medical permission and my spiritual obligation to my family.

(Parent Signature)

(Date)

Please call me I would like to volunteer during my child's RE/Confirmation Session .

How do I apply for financial aid for Religious Education or Confirmation Tuition?

➤Go to this website:

<https://online.factsmgt.com/signin.aspx>



➤In the New User Registration Box click “Register”

➤On the “Institution Sign up” page click the bullet for “Search for my Institution”

➤In the “Institution search Box” type in 60544 in the zip code box. Click green search button.

➤When you see the institution choices appear, click on the “St Mary Immaculate Religious Education/Confirmation” institution

➤This will take you to the beginning of the St. Mary Immaculate Religious Education/Confirmation section of FACTS.

From this point – follow the prompts to create your own account to enter your own personal financial information.



➤Information that you will need to complete the application:

- What year you will be applying for (2023-2024)
- Total due (fees and tuition) for your family (see below)
- Tax return for tax year end 2021 or 2022 (only one year is needed)
- Household expenses, student loans, other financial obligations
- Means to pay the \$40 processing fee—debit card or credit card

There will be a \$40 non-refundable processing fee that all applicants will have to pay to the FACTS program to apply for aid.

FACTS Tuition and Fees Worksheet (\$40 processing fee required)

Current Tuition 2023-2024 \$ _____

Sacramental Fee \$ _____

TOTAL Due for 2023-2024 \$ _____

Go to this website to complete application

<https://online.factsmgt.com/Signin.aspx>

Please turn in your registration as soon as you complete the FACTS process online.

We will hold the registration in our pending file until we receive word from our Business office of the financial resolution. We will contact you when the process is complete.