



St. John XXIII Parish Religious Education

Family Registration Form for 2023-2024

Sunday Morning Program, English

_____ St. Mary Church, 11:00 a.m.-12:15 p.m. _____ St. Nicholas Church, 9:00-10:15 a.m.

Parent/Guardian 1

Last Name: _____ First Name: _____

Email: _____ Cell phone: _____

Religion: _____ Occupation: _____

Parent/Guardian 2

Last Name: _____ First Name: _____

Email: _____ Cell phone: _____

Religion: _____ Occupation: _____

Home Address: _____

Emergency Contact: _____
(name and phone)

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For Director's Use ONLY: Registration Completed By August 25, 2023

(Forms complete, sacramental info verified, payment or payment arrangements made)

Tuition Rate	\$175 per child
Sacrament Fees	\$75 per child for First Reconciliation/Communion \$100 per child for Confirmation

Tuition Total	
Sacrament Fees Total	
Total Due	

Payment received: ___ Check/M.O. # _____

___ Cash in the amount of \$ _____

___ Quarterly Billing (June, Sept, Dec, March)

___ Monthly Billing (September thru February)

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Authorization to Reproduce Images 2023-2024

I understand that Saint John XXIII Parish, 806 Ridge Avenue, Evanston IL, wishes to have the right to utilize photos which contain images of me/us and/or members of my/our family for the purposes of publicizing the events and programs of the parish, which might include posters, flyers, brochures, the parish bulletin or newsletter and other printed materials as well as possible use on the parish websites. The children in the photos will not be identified by name in publicity materials designed to be distributed to the public or on the web.

I hereby expressly agree and consent to the use of images of me and/or members of my family, my name, and to the reproduction and use by Saint Mary Parish and its employees of my/our images for advertising, promotion, or any other lawful uses in any connection with the events, ministries and programs of the parish.

ADULTS

I hereby certify and represent that I am over the age of eighteen and that I have read the foregoing and fully understand its meaning and effect.

Parent/Guardian 1

Signature: _____ Name: _____
(print name)

Parent/Guardian 2

Signature: _____ Name: _____
(print name)

Date: _____

ON BEHALF OF YOUR MINOR CHILDREN

I represent that I am the parent/guardian of *(print children's full names)*

_____,
and I further warrant that I am of full age and have the legal authority to execute the above consent form. I have read the consent form before signing below and am fully aware of its contents.

Father/Guardian

Signature: _____ Name: _____
(print name)

Date: _____

Mother/Guardian

Signature: _____ Name: _____
(print name)

Date: _____