

**In case of an emergency, call this number:**

\_\_\_\_\_

Whose number is this? \_\_\_\_\_

**St. Cecilia  
2017-2018 Student Registration**

**Registration Forms and Fees Due No Later Than June 30, 2017**

**Class Times:**

Wednesday Afternoons: 4:30-5:45

\*\*We will also have an Opening Mass and Open House, a Scriptural Rosary, All Souls Day Mass, Ash Wednesday Mass, and Stations of the Cross which will be held on a Wednesday evening at 6:30 PM. Those dates will be on the final calendar.

**Family Name (This refers to the last name of the person responsible for the child(ren) being registered)**

\_\_\_\_\_

Family registered parishioner at St. Cecilia? Yes \_\_\_\_\_ No \_\_\_\_\_ Envelope Number: \_\_\_\_\_

If No, where is family registered? Parish \_\_\_\_\_ City, State \_\_\_\_\_

\*\*There is an out of parish additional fee added to tuition for those families who are either not registered or not actively supporting St. Cecilia Parish through time, talent and treasure.

**Students being registered:**

Name \_\_\_\_\_ Grade\* \_\_\_\_\_ Previous Rel. Ed.? \_\_\_\_\_ Last year of formation \_\_\_\_\_

Name \_\_\_\_\_ Grade\* \_\_\_\_\_ Previous Rel. Ed.? \_\_\_\_\_ Last year of formation \_\_\_\_\_

Name \_\_\_\_\_ Grade\* \_\_\_\_\_ Previous Rel. Ed.? \_\_\_\_\_ Last year of formation \_\_\_\_\_

Name \_\_\_\_\_ Grade\* \_\_\_\_\_ Previous Rel. Ed.? \_\_\_\_\_ Last year of formation \_\_\_\_\_

**\*Grade – This refers to their grade level in school.** Students who have not had previous Religious Education and are in 2<sup>nd</sup> grade or older will be in a level appropriate to their needs for formation determined by the DRE in collaboration with the parents.

**Father's Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_, IL Zip \_\_\_\_\_

**Preferred Telephone #:** \_\_\_\_\_

**Other telephone:** \_\_\_\_\_

Email address: \_\_\_\_\_@\_\_\_\_\_. \_\_\_\_\_

Religion: \_\_\_\_\_ Practicing: Yes \_\_\_\_\_ No \_\_\_\_\_

**Mother's Full Name:** \_\_\_\_\_

**Address:** (If same as Father, write SAME and go to next section)

\_\_\_\_\_

\_\_\_\_\_, IL Zip \_\_\_\_\_

**Preferred Telephone #:** \_\_\_\_\_

**Other telephone:** \_\_\_\_\_

Email address: \_\_\_\_\_@\_\_\_\_\_. \_\_\_\_\_

Religion: \_\_\_\_\_ Practicing: Yes \_\_\_\_\_ No \_\_\_\_\_

**Child(ren) live with:** \_\_\_\_\_ Both parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_ Guardian+

+Guardian's Name \_\_\_\_\_ Telephone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

*Please provide a copy of guardian papers as well as a list of anyone besides yourself who can pick up the children.*

**Sacramental Records:**

All first-time registrants need to provide certified copies of Baptismal record for each child.

1<sup>st</sup> Communion and Confirmation Candidates will also need to provide a certified copy of their Baptismal record unless previously submitted or baptized at St. Cecilia..

**2017-2018 Returning and New Student Registration (REQUIRED!)**

*(If your child has been in our program for at least one full year, you may write "on file" for the sacramental information -- we will verify that we have their record.) We need birth info and all the current school information, please. Please refer to the last page if your child has an IEP or 504 plan on file which will help us do our best for your child.*

**Student's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Place of birth** \_\_\_\_\_

**Grade in School** \_\_\_\_\_ **Name of School** \_\_\_\_\_ **RE Level** \_\_\_\_\_

Church of Baptism: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

▪ Church of 1<sup>st</sup> Reconciliation \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

▪ Church of 1<sup>st</sup> Communion \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

If child is in grades 2 – 8, where did they receive previous Religious Education?

Grades attended: \_\_\_\_\_

Parish Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

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**Student's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Place of birth** \_\_\_\_\_

**Grade in School** \_\_\_\_\_ **Name of School** \_\_\_\_\_ **RE Level** \_\_\_\_\_

Church of Baptism: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

▪ Church of 1<sup>st</sup> Reconciliation \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

▪ Church of 1<sup>st</sup> Communion \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

If child is in grades 2 – 8, where did they receive previous Religious Education?

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Parish Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

**Student's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Place of birth** \_\_\_\_\_

**Grade in School** \_\_\_\_\_ **Name of School** \_\_\_\_\_ **RE Level** \_\_\_\_\_

Church of Baptism: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

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Date of Sacrament \_\_\_\_\_

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Date of Sacrament \_\_\_\_\_

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Parish Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

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**Student's Name** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_ **Place of birth** \_\_\_\_\_

**Grade in School** \_\_\_\_\_ **Name of School** \_\_\_\_\_ **RE Level** \_\_\_\_\_

Church of Baptism: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

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▪ Church of 1<sup>st</sup> Reconciliation \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

▪ Church of 1<sup>st</sup> Communion \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Date of Sacrament \_\_\_\_\_

If child is in grades 2 – 8, where did they receive previous Religious Education?

Grades attended: \_\_\_\_\_

Parish Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

## Individualized Education Plan/504 Record

If your child has an IEP/504 Plan, please share that accommodation plan here:

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Is there any additional information that will assist us in assuring confidence and comfort for your child?

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