## K-10 RELIGIOUS EDUCATION REGISTRATION



## 1 - FAMILY INFORMATION

2 - RELIGIOUS EDUCATION PARTICIPANTS  Please list the First Name (and last if different than above), and Grade registering and the school they attend  Name Grade Birth [ Name Grade Birth [	Family E-mail  (H)  r (Cell)receive texts: yes/no
City Zip Phone Father (Cell) receive texts: yes/no Mother  Parish Members: yes no, if not what church do you attend re  2 - RELIGIOUS EDUCATION PARTICIPANTS  Please list the First Name (and last if different than above), and Grade registering and the school they attend  Name Grade Birth II  Name Grade Birth II	r (Cell)receive texts: yes/no
Parish Members: yes no, if not what church do you attend re  2 - RELIGIOUS EDUCATION PARTICIPANTS  Please list the First Name (and last if different than above), and Grade registering and the school they attend  Name Grade Birth I  Name Grade Birth I	r (Cell)receive texts: yes/no
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Name Grade Birth [	egularly?
Please list the First Name (and last if different than above), and Grade registering and the school they attend  Name Grade Birth [ Name Grade Birth [	
Name Grade Birth [	e for the current school year of each child you are
	DateSchool
	DateSchool
Name Grade Birth [	Date School
Name Grade Birth [	Date School
Name Grade Birth [	Date School
HOME-SCHOOL: Please indicate if you will be home-schooling your character of the entire year (name of child this applies to) □ No, they will be attending in-person (name of child this applies to) ALLERGY INFORMATION: Please list any food or other allergies for you	
3 - TUITION AND FEES - The tuition is non-refundable due to the fact throughout the year. If the cost could prohibit you from participating installment plans as soon as possible.	·
1 Child <b>\$70</b> total 2 Children <b>\$140</b> to	otal 3 or More <b>\$210</b> total
Office use only Amount Due Amount Paid	

Registrations will be accepted on a first-come first serve basis depending on the number of students registered and the need for volunteers. Because we see Religious Education as a cooperative effort between the Family, Child, and Church, we look to parents/guardians to volunteer in the area(s) your child(ren) is/are involved in, please, see enclosed volunteer form to sign up. Any questions, reach out to:

**Dennis Kurtz** 

**Amy Crowe** 

Director of Parish Formation

Coordinator of Faith Formation & Parish Activities

715-832-2504 x103

715-832-2504 x100

religiousformation@saintolafparish.org

## DIOCESE OF LA CROSSE - ST. OLAF FAITH FORMATION COMPREHENSIVE CHILD CONSENT AND RELEASE FORM Parental/Guardian Consent Form and Liability Waiver

PERMISSION TO USE PARTICIPANT PHOTOS: You na			
parish newsletters, bulletins, social media, etc.)	Initials of Parent/Guardian:	Date:	
	. 6		
MEDICAL MATTERS: I hereby warrant that to the bes			
assume all responsibility for the health of my child.	Initials of Parent/Guardian:	Date:	
<b>EMERGENCY MEDICAL TREATMENT:</b> In the event of child to a hospital for emergency or surgical treatme the hospital or doctor. In the event of an emergency contact:	nt. I wish to be advised prior to any	further treatment by	
Parent/Guardian Name & relationship:	Phone	e:	
Family doctor:	Phone:		
Family Health Plan Carrier:	Policy	Policy #:	
Signature:	Date:		
In Case of an emergency and I cannot be reached pl	ease contact:		
Name:	Phone Number:		
Relationship to family:			

**FIELD TRIPS**: If there would be a field trip for your child/ren's class/es there will an additional form for you to fill out pertaining to that event.

**SAFE ENVIRONMENT TRAINING:** Please go to the Diocesan website (https://diolc.org/safe-environment/parents/) click on and "Complete the Safe Environment Training". Select St. Olaf Parish, Eau Claire from the dropdown list. You will be prompted to read information or watch video clips, then asked to acknowledge that you have done so. You will then be asked for your first and last name. This information is for record keeping only. If you are unable to access the information or links, please contact Dennis or Amy for help or paper copies.

**Please fill out the attached diocesan form**: Verification of Parent Safe Environment Training and return to Robin.

**Dennis Kurtz** 

Director of Parish Formation
715-832-2504 x103
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**Amy Crowe** 

Coordinator of Faith Formation & Parish Activities 715-832-2504 x100

Please return to the Parish Office by Wednesday, September 20, 2023 or mail to PO Box 1203, Eau Claire WI 54702-1203