

**CHRIST THE SERVANT  
RELIGIOUS FORMATION REGISTRATION  
2021-2022**



Are you a registered member of the parish? Yes \_\_\_\_\_ No \_\_\_\_\_ *(Required - please stop at the parish office!)*

**PLEASE PRINT:** Last Name: \_\_\_\_\_

Father's name: \_\_\_\_\_ Religion \_\_\_\_\_

Mother's name: \_\_\_\_\_ Religion \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Child(ren) live(s) with: Father: \_\_\_\_\_ Mother: \_\_\_\_\_ Stepfather: \_\_\_\_\_ Stepmother: \_\_\_\_\_ Guardian \_\_\_\_\_

Phone numbers: Home: \_\_\_\_\_

Mom's cell: \_\_\_\_\_ Dad's cell: \_\_\_\_\_

Mom's work: \_\_\_\_\_ Dad's work: \_\_\_\_\_

email address(es): \_\_\_\_\_ *(please print clearly)*

Emergency Contact, in the event we are unable to reach a parent during a session:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

In case of an emergency cancellation of classes, which is the best number to call: \_\_\_\_\_

<p align="center"><b>CHOICES BY GRADE LEVEL</b></p> <p>List each child &amp; session preference on page 2 and check</p> <p><b>Elementary Session:</b></p> <table border="0"> <tr> <td align="center"><b>In-Person</b></td> <td align="center"><b>Remote</b></td> </tr> <tr> <td>Grade 1 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 2 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 3 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 4 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 5 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 6 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td>Grade 7 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning</td> <td></td> </tr> <tr> <td colspan="2"><b>Confirmation Session:</b></td> </tr> <tr> <td colspan="2">Grade 8 <input type="checkbox"/> Tue 4:30-5:45 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning</td> </tr> <tr> <td colspan="2">Confirmation &amp; Communion remote students are required to be in person for many activities for the Sacrament preparation.</td> </tr> </table>	<b>In-Person</b>	<b>Remote</b>	Grade 1 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning		Grade 2 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning		Grade 3 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning		Grade 4 <input type="checkbox"/> Tue 4:30-5:45pm <input type="checkbox"/> eLearning		Grade 5 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning		Grade 6 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning		Grade 7 <input type="checkbox"/> Tue 6:00-7:15 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning		<b>Confirmation Session:</b>		Grade 8 <input type="checkbox"/> Tue 4:30-5:45 <input type="checkbox"/> Wed 6:00-7:15 <input type="checkbox"/> eLearning		Confirmation & Communion remote students are required to be in person for many activities for the Sacrament preparation.		<p align="center"><b>All classes are held at Christ the Servant Church.</b></p> <p>Tuition &amp; Fees are non-refundable after the 1<sup>st</sup> day of class.</p> <p><b>Tuition for each child: \$150</b></p> <p align="center"><b>Sacramental Fees:</b></p> <p><b>Reconciliation/Eucharist (Grade 2): \$100</b></p> <p><b>Confirmation (Grade 8): \$100</b></p> <p><small>(If this creates an impossible burden on your family, contact the Director of Religious Formation.)</small></p> <p><b>Make checks payable to: Christ the Servant Catholic Church</b></p> <p><b>Tuition may be paid via credit card online at www.ctswoodridge.org.</b></p> <p><b>Select &lt;Donation&gt; then &lt;Religious Formation&gt;</b></p> <p><b>Full payment should be received before classes begin.</b></p> <p><input type="checkbox"/> I am paying Tuition in Full at this time</p> <p><input type="checkbox"/> I am paying \$_____ at this time with remainder due before classes begin.</p> <p><input type="checkbox"/> Cash/Check <input type="checkbox"/> Credit Card (check which applies)</p>
<b>In-Person</b>	<b>Remote</b>																						
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<p>While best efforts are made to honor placement requests, class sizes are limited, and placement will be made on a first-completed-registration, first-placed basis. A registration is complete <b>when all five pages are filled out completely</b>, they are in the Parish Office and a payment is made or a payment agreement is in place with the Religious Formation Office.</p>	<p><input type="checkbox"/> We have participated in Religious Formation previously and have supplied the parish with a copy of each child's baptismal record.</p> <p>New families/children:</p> <p><input type="checkbox"/> I am including copies of my children's baptismal records -or-</p> <p><input type="checkbox"/> My children were baptized at Christ the Servant</p>																						

**Please complete reverse side of this page**

Office Use Only:	Parishioner # _____	Gift-sharing: _____	Payment: _____
Reg. #	Baptismal cert: _____	Medical form: _____	Date: _____
			Method: _____

Family Last Name: \_\_\_\_\_

Child's First Name <i>(Enter each child below)</i>	M/F	Date of Birth	Last RF Grade Completed	School Grade 2019-20	School	Sacraments <i>(Check if Received)</i>	1 <sup>st</sup> Choice Day/Time	2 <sup>nd</sup> Choice Day/Time
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1.						<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist		
Medical Conditions, Allergies								
Special Educational Needs								
How Does Your Child Learn Best?								
Special Emotional Needs or Situations								

2.						<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist		
Medical Conditions								
Special Educational Needs								
How Does Your Child Learn Best?								
Special Emotional Needs or Situations								

3.						<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist		
Medical Conditions, Allergies								
Special Educational Needs								
How Does Your Child Learn Best?								
Special Emotional Needs or Situations								

4.						<input type="checkbox"/> Baptism <input type="checkbox"/> Reconciliation <input type="checkbox"/> Eucharist		
Medical Conditions, Allergies								
Special Educational Needs								
How Does Your Child Learn Best?								
Special Emotional Needs or Situations								

**The Diocese requires that the following acknowledgments to be on file for each family:**

*These forms are available online at the Religious Formation webpage or hard-copy outside the Religious Formation Office.*



**PARENT ACKNOWLEDGEMENT FOR 2021/2022**

I acknowledge that I have received and read the:

- **Parent Guide: Understanding & Preventing Child Sexual Abuse**
- **Parent Guide: Internet Safety for Children & Teens**
- **Diocesan Pastoral Policy Regarding Sexual Abuse of Minors**
- **Standards of Behavior for Those Working with Minors** (Only for families **NEW** to the Religious Formation Program in 2019/2020)

I have reviewed the 2021-2022 Religious Formation Policy Handbook.

Videotaping and Still Photographs may be taken during Religious Formation classes and events. I give permission for my child(ren)'s participation in the videotaping and/or still photographs, which may be used for recording of events, and future promotional efforts, including the parish website.

**Parent Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

*The parties agree that this document may be electronically signed and that the electronic signatures appearing on this document are the same as handwritten signatures for the purposes of validity, enforceability and admissibility.*

*Transmission via email is not encrypted, so if you are concerned about the security of your sensitive information, please print and fax this form, surface mail it or hand deliver it.*

# CHRIST THE SERVANT PARISH RELIGIOUS FORMATION PROGRAM 2021-2022 MEDICAL PERMISSION FORM



**Insurance Information:** (same for all children in family)

Policy in the name of: \_\_\_\_\_

Insurance Company: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Family Physician: \_\_\_\_\_ Phone: \_\_\_\_\_

I understand that first aid will be administered by the adult staff in charge of the Religious Formation (and/or those transporting my child to and from program events and activities) as their judgment deems advisable. I grant permission for adult staff to make the necessary referrals to qualified physicians for treatment of illness or accidents of a more serious nature. I understand that I will be promptly notified at the onset of any serious illness or in the event of a serious accident and prior to any major surgery, unless a delay in communication would endanger life. In case of medical emergency, I understand that every effort will be made to contact me. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to secure proper treatment for my child as deemed necessary.

I grant permission for the administration of First Aid to \_\_\_\_\_  
(First and Last)

Does this child have allergies? (Medication, foods, insect bites or stings, etc.)

No \_\_\_\_\_ Yes (please specify) \_\_\_\_\_

I grant permission for the administration of First Aid to \_\_\_\_\_  
(First and Last)

Does this child have allergies? (Medication, foods, insect bites or stings, etc.)

No \_\_\_\_\_ Yes (please specify) \_\_\_\_\_

I grant permission for the administration of First Aid to \_\_\_\_\_  
(First and Last)

Does this child have allergies? (Medication, foods, insect bites or stings, etc.)

No \_\_\_\_\_ Yes (please specify) \_\_\_\_\_

I grant permission for the administration of First Aid to \_\_\_\_\_  
(First and Last)

Does this child have allergies? (Medication, foods, insect bites or stings, etc.)

No \_\_\_\_\_ Yes (please specify) \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

*The parties agree that this document may be electronically signed and that the electronic signatures appearing on this document are the same as handwritten signatures for the purposes of validity, enforceability and admissibility.*

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**CHRIST THE SERVANT PARISH  
RELIGIOUS FORMATION PROGRAM  
2021-2022 "SHARING OF GIFTS" FORM**

God has blessed Christ the Servant parish with people who are generous in donating their gifts of time and talent. All families participating in the Religious Formation programs of our parish are needed and expected to share their gifts with the program in some way; large or small.

**We need YOU! In addition to praying, our family will commit to:**

Parent Name: \_\_\_\_\_

Have you attended a *Protecting God's Children* training session?: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: \_\_\_\_\_

**Circle** children's grade levels:    1       2       3       4       5       6       7       Confirmation

**CATECHIST (teaches the faith)**

- 1.    \_\_\_\_\_ Catechist (Grade \_\_\_\_\_)
- 2.    \_\_\_\_\_ Confirmation Catechist
- 3.    \_\_\_\_\_ Catechist aide
- 4.    \_\_\_\_\_ Substitute catechist (on call)

**F.A.C.T. (Families with Active Catholic Teens)**

- 17.    \_\_\_\_\_ Serve on Leadership Group
- 18.    \_\_\_\_\_ Serve at activities
- 19.    \_\_\_\_\_ Help with organizing events

**RELIGIOUS FORMATION COMMISSION**

- 5.    \_\_\_\_\_ Commission member

**C.L.O.W. (Children's Liturgy of the Word)**

**Sundays at 10am Mass**

- 20.    \_\_\_\_\_ Presider (Leader)
- 21.    \_\_\_\_\_ Shepherd (Helper)

**SPECIAL EVENTS --**

- 6.    \_\_\_\_\_ Be an Event planner  
(help plan and implement events)
- 7.    \_\_\_\_\_ Be an Event helper  
(help facilitate family activity stations, set up, cleanup, etc)
- 8.    \_\_\_\_\_ Plan and organize food
- 9.    \_\_\_\_\_ Plan and organize service project
- 10.    \_\_\_\_\_ Help with "odd jobs"

**OTHER TALENTS**

- 22.    \_\_\_\_\_ Photographer
- 23.    \_\_\_\_\_ Art Work – by hand
- 24.    \_\_\_\_\_ Art Work/design – by computer
- 25.    \_\_\_\_\_ Sewing
- 26.    \_\_\_\_\_ Music
- 27.    \_\_\_\_\_ Drama

**SUPPORT TASKS**

- 11.    \_\_\_\_\_ Phone Calling
- 12.    \_\_\_\_\_ E-mail coordinator
- 13.    \_\_\_\_\_ Coordinate volunteers
- 14.    \_\_\_\_\_ Support tasks that can be done at church
- 15.    \_\_\_\_\_ Support tasks that can be done at home
- 16.    \_\_\_\_\_ Help with Fund-Raising events

**HOSPITALITY**

- 28.    \_\_\_\_\_ Provide treats as needed
- 29.    \_\_\_\_\_ Provide beverages as needed
- 30.    \_\_\_\_\_ Set-up and clean-up for events

**OTHER**

- 31.    \_\_\_\_\_ Other ways we would like to help:  
\_\_\_\_\_