

Our Lady of Refuge
Religious Formation
2017 - 2018 Registration Form

Family's Last Name: _____

Address: _____

City _____ **Zip** _____

Dad's Cell Phone #: _____ **Mom's Cell Phone #:** _____

****E-Mail Address:** _____

In case of emergency please contact:

Name (*Someone other than Parent*)

Phone #

Father's Name: _____ Religion: _____

Mother's Name: _____ Religion: _____

Mother's Maiden Name: _____

Child's Name: _____ Birth Date: _____ Gender: M / F

Grade in Fall: _____ School: _____

Baptism Date/ Place: _____ First Communion Date/ Place: _____

Class Day Requested: _____

Child's Name: _____ Birth Date: _____ Gender: M / F

Grade in Fall: _____ School: _____

Baptism Date/ Place: _____ First Communion Date/ Place: _____

Class Day Requested: _____

Child's Name: _____ Birth Date: _____ Gender: M / F

Grade in Fall: _____ School: _____

Baptism Date/ Place: _____ First Communion Date/ Place: _____

Class Day Requested: _____

**This registration form is not complete and cannot be accepted until a copy of your child's
Baptismal Certificate is submitted and registration fee is paid.**

**If your child was Baptized at OLR please write the date and you will not need to turn in a
certificate. If you turned a copy in last year you do not need to resubmit it.**

Are you a registered member of Our Lady of Refuge Parish? _____ If yes, envelope # _____

Where did your child(ren) attend Religious Education last year if not at OLR? _____

*I acknowledge that by signing this document I give permission to Our Lady of Refuge to use a picture
of my child on their website or other publications.*

Signature _____ Date _____

Our Lady of Refuge Religious Education Class Offerings

Grade Level in Fall 2017	Days Offered	Times Offered
Family Catechesis Grades K-8	Saturday	1:30-5:00pm
Family Catechesis Grades K-8	Sunday	1:30-5:00pm

	Tuition	1 st Communion and 2 nd Year Confirmation Sacramental Fee
In Parish	\$225 Per Family	\$75
Out of Parish	\$450 Per Family	\$75

Please send in full tuition by **check or pay on-line** when submitting your registration form.
Registrations received after September 15 will be subject to a \$50 late fee.

Please make checks payable to: **Our Lady of Refuge**

No child will be denied classes due to lack of funds. Payment plans are available.
Contact Bonnie to make arrangements.

Medical Information

In case of a serious accident or illness, and I cannot be reached, I authorize Our Lady of Refuge to contact the physician indicated below. If it is impossible to contact the doctor, OLOR may make whatever arrangements seem necessary, including transporting to the hospital I have indicated below.

Allergies or medical conditions?

Physician's Name _____ Phone _____

Transport my child to _____

Signature _____ Date _____

Volunteers NEEDED!

All Training will be provided

Choice of Day/ Grade

Catechist for grades K-8 _____

Substitute Catechists _____

Hall Monitor _____

Hospitality _____

Donate Bake Goods for First Communion in May _____