



Religious Education 2023-2024

Catholic Diocese of Peoria, IL Participant Registration Form

St. Louis Catholic Church



Family (Last) Name: _____ Parents' Names: _____

Address – Street: _____ City, State, Zip: _____

Father's phone: _____ Mother's phone: _____

Email: _____

Child(ren) to be enrolled in Religious Education for the upcoming year:

Child's Name	Date of Birth	Grade in 2023/24	Known Allergies & Medical Information we need to be aware of (including current medications)	Sacraments Received (Baptism, Reconciliation, Communion)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Emergency contact (**when parents can't be reached**): _____

Relationship to child: _____ Phone number (home, cell, work): _____

GENERAL PERMISSION

I request that my child(ren) listed above be allowed to attend Religious Education, including Catechesis of the Good Shepherd, Confirmation Preparation, Jr High & High School Youth Ministry, and/or Totus Tuus/Totus Tots, located at St Louis Parish for the duration of the year, September 1, 2023 – August 31, 2024. I hereby release and agree to indemnify and hold harmless the parish, its employees, staff, agents, volunteers, and the Catholic Diocese of Peoria, IL from any and all liability, for injuries, damages, medical expenses or any other loss to my child or family, including attorney fees, arising from claims of any kind or nature whatsoever from my child’s participation in this program.

MEDICAL PERMISSION FORM

I, _____, grant permission for the administration of First Aid to my child(ren) listed above by the people in charge of Religious Education at St Louis Parish, to sign the necessary releases as may be required, and to make the necessary referrals to qualified physicians for the treatment of illness or accidents of a more serious nature. I understand I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when delay in such communication would endanger life. In the case of a medical emergency, I understand that every effort will be made to contact the parent/guardian of the participant. In the event that I cannot be reached, I hereby give permission to the physicians selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery if deemed necessary for my child.

INSURANCE INFORMATION

Policy Holder (in the name of): _____ Insurance Company: _____

Policy Number: _____

Authorized Physician: _____ Phone #: _____

Authorized Hospital: _____

VIDEOTAPING AND STILL PHOTOGRAPHS

Video, still photographs and audio records may be taken during Religious Education programs. This authorization form constitutes permission for my child(ren)’s participation in videotaping, still photographs, and/or audio records, which may be used for future promotional efforts, including the Catholic Diocese of Peoria publications and websites.

Parent(s) Signature: _____ Date: _____

Return form to: St. Louis Church, 616 S Gosse Blvd, Princeton, IL 61356 by September 2, 2023.

No one will be turned away due to inability to pay. Please contact Rebekah Mead for financial assistance, 815-303-2330.

Please make checks payable to: *St. Louis Church* One Child: ___ \$30 Two Children: ___ \$ 45 Three+ Children: ___\$60

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Session Registration Form/Weekly Schedule

Please indicate below your child's name and CGS level (1, 2, or 3) and which session(s) you would prefer. Registration for each session is on a first come, first served basis, but we will do our best to accommodate your choice. Please note that sacramental prep for 2nd grade and Confirmation prep for 7th and 8th grade are ONLY offered on Wednesday nights, 6-7:30.

Level 1: 3 years old – Kindergarten

Level 2: 1st and 3rd grade

Level 3: 4th-6th grade

	Tuesday	Wednesday	Thursday
3:30-5 PM	CGS Level 1 CGS Level 2	CGS Level 3	CGS Level 3
6-7:30 PM	CGS Level 1 CGS Level 2	2 nd grade Sacramental Prep 7 th grade Confirmation Prep 8 th grade Confirmation Prep	CGS Level 3

Child's Name & Level

1st Choice

2nd Choice

Not Available (if applicable)
