

# Mary, Mother of Divine Grace Parish Religious Education Program

Registration Form

2021 - 2022

Mary, Mother of Divine Grace Parish will continue to have ONE Religious Education Program for the year 2021/2022. We are waiting for the decision from the Archdiocese of Chicago as to whether the Religion Classes will be offered On-Site or On-line. If offered On-Site, the location will be at the Divine Infant Location in the school building at address: 1604 New Castle Avenue, Westchester, IL. 60154.

*This Registration Form is for **RETURNING** students only (those who have attended our RE Program On-line this year 2020-2021). Please download this form, complete it, scan it and send it as an attached file to the Religious Education Office Email at [cnantaba@archchicago.org](mailto:cnantaba@archchicago.org). A Registration Fee of **\$40** is due at the time of Registration, and the rest of the Tuition/Fees should be paid following the payment options listed at the last page of this form. Please make checks payable to Mary, Mother of Divine Grace Parish and mail it to the Parish Business Office at Address 2550 Mayfair Avenue, Westchester, IL 60154. Thank you!*

## **STUDENT INFORMATION**

1. Child's Name: \_\_\_\_\_

First

Middle

Last

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

City/State/Zip: \_\_\_\_\_

Child's Birth Date: \_\_\_\_\_

Home Phone: (\_\_\_\_\_) \_\_\_\_\_

Family Email: \_\_\_\_\_

Name/City of Public School: \_\_\_\_\_

Grade in September of 2021: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

RE Registration Form for **RETURNING STUDENTS!**

2. **Child's Name:** \_\_\_\_\_  
                                    First                                      Middle                                      Last

Child's Birth Date: \_\_\_\_\_

Name/City of Public School \_\_\_\_\_

Grade in September of 2021 \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

3. **Child's Name:** \_\_\_\_\_  
                                    First                                      Middle                                      Last

Child's Birth Date: \_\_\_\_\_

Name/City of Public School \_\_\_\_\_

Grade in September of 2021 \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

4. **Child's Name:** \_\_\_\_\_  
                                    First                                      Middle                                      Last

Child's Birth Date: \_\_\_\_\_

Name/City of Public School \_\_\_\_\_

Grade in September of 2021 \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

**FAMILY INFORMATION:**

We are REGISTERED at \_\_\_Mary, Mother of Divine Grace Parish (DI or DP)  
Envelope # \_\_\_\_\_

We are registered at another parish: \_\_\_\_\_  
\_\_\_\_We are NOT REGISTERED at any parish

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**MOTHER'S INFORMATION**

_____	_____	_____
First Name	Last Name	Maiden Name
Address _____		
<i>(if different from child's)</i>		
Home phone _____	Cell Phone _____	
Work Phone _____	RELIGION _____	
Email Address: _____		

**FATHER'S INFORMATION**

_____	_____
First Name	Last Name
Home Phone _____	Cell Phone _____
Work Phone _____	RELIGION _____
Email Address: _____	

**LEGAL GUARDIAN INFORMATION**

Name \_\_\_\_\_ *If parents are separated, divorced or deceased, or if the child lives with someone other than the natural parents or if there are other special circumstances, use this space to describe the situation:*

**EMERGENCY/MEDICAL INFORMATION:**

**Please indicate which child...if needed please use a separate sheet of paper.**

**Child's Name:** \_\_\_\_\_  
Does your child have any special needs, e.g. medication, allergies?  
\_\_\_\_\_

Is your child enrolled in special education classes? Have a learning disability or physical handicap? If yes, please explain.

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IF YOU cannot be reached in an emergency, whom can we contact?

\_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Name

Phone Number **INCLUDING** area code

**Relationship to child:** \_\_\_\_\_

=====

**Mary, Mother of Divine Grace Parish  
Religious Education Program  
Westchester, IL 60154  
2021 - 2022 School Year**

Dear Parent/Guardian,

The following release forms must be signed and kept in your child's file.  
Please complete each section and return this sheet to the office at the time of  
registration. (A copy must be signed each year.)

Thank you,  
Sr. Christine Nantaba, IHMR  
Religious Education Administrator

\*\*\*\*\*

I hereby give permission for my child \_\_\_\_\_ to  
participate in the Religious Education Program at Mary, Mother of Divine Grace Parish.  
I understand that this may include some physical and outdoor activities. I hereby release  
and indemnify Mary, Mother of Divine Grace Parish, its staff and volunteers, and the  
Catholic Bishop of Chicago, a corporation sole, from any and all liability arising from  
claims of any kind or nature whatsoever from my child's participation in this program.

\_\_\_\_\_  
Parent/Guardian Signature Date

**AUTHORIZATION FOR MEDICAL TREATMENT:**

In the event that the undersigned, or my authorized physician, cannot be reached, and in  
the judgment of the Director of Religious Education (or other appropriate staff member),  
there is a necessity for immediate examination and/or treatment of my child, I hereby  
authorize the aforesaid personnel to obtain for my child such medical services as are  
deemed necessary.

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Name of Child's Physician: \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\*\*\* I hereby give permission for my child \_\_\_\_\_ to have a snack at break time, when available, while s/he is participating in Religious Education Classes or functions. **These restrictions apply:**

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**RELIGIOUS EDUCATION PAYMENT ARRANGEMENT (2021 – 2022)**

**Introduction:**

The Religious Education Program offers faith formation to families and their children within our Parish and all around the Archdiocese of Chicago. The smooth-running of the program depends solely on the Tuition and Fees collected from the families that enroll their children in the program. The promptness with which the families pay off their accounts contributes a lot to this endeavor.

The Religious Education Tuition for grades 1- 8 and the Sacramental Fees are as follows:

- **The Tuition for 2021 – 2022** *(Please see the payment options below):*

\$250 for 1 child  
\$350 for 2 children  
\$450 for 3 children or more

- **The Sacramental Fees for 2021-2022** *(Please see the payment options below):*

\$50 for Holy Eucharist (First Communion)  
\$80 for Confirmation

**Payment Options:**

Each family is asked to choose a **PAYMENT OPTION** to follow and adhere to for

RE Registration Form for **RETURNING STUDENTS!**

paying off this year's RE Tuition and Fees. Please check off one of the following options and keep a copy of this page for your records:

**OPTION #1:** My Family will pay the Full Amount of the Tuition and Fees Upfront at the time of Registration for the year 2021 – 2022:

YES\_\_\_ Family Name: \_\_\_\_\_ Signed  
by \_\_\_\_\_

**OPTION #2:** My Family will pay 50% of the total amount of the Tuition and Fees in 2 Payments; the 1<sup>st</sup> Payment is Due on October 1<sup>st</sup> and the 2<sup>nd</sup> Payment on December 1, 2021.

YES\_\_\_ Family Name: \_\_\_\_\_ Signed  
by \_\_\_\_\_

1<sup>st</sup> Payment - 50% of the Tuition and Fees **DUE ON OCTOBER 1, 2021.**  
2<sup>nd</sup> Payment - 50% of the Tuition and Fees will be **DUE ON DECEMBER 1, 2021**

1. **Payment Method:** Checks, Money Orders, Cash and Credit Card payments are all accepted. Please make checks payable to Mary, Mother of Divine Grace Parish (Religious Education).
2. **Credit Card Payment Option:** If you wish to use a Credit Card, there is an additional Credit Card Fee of 3% to the Total Amount. Payments can be made through "WESHARE.COM," a church On-line giving platform that our Parishioners use to give or donate money to our church. ***Please call our Bookkeeper at (708)865-8071 if you have any questions.***

Below is the breakdown of the Total Tuition and Fees with the additional 3% charge:

3. **Tuition:**

**\$250 for 1 child + 3% Credit Card Charge = \$257.50**

**\$350 for 2 children + 3% Credit Card Charge = \$360.50**

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**\$450 for 3 children or more + 3% Credit Card Charge =  
\$463.50**

**Sacramental Fees:**

**First Communion Fee: \$51.50**

**Confirmation Fee: \$82.40**

**4. Credit Card Instructions:**

- Please get On-line and onto  
<https://marymotherofdivinegrace.org.churchgiving.com/>
- OR go to [www.marymotherofdivinegrace.org](http://www.marymotherofdivinegrace.org) and follow the prompts under the STEWARDSHIP TAB.
- Please contact our **Bookkeeper at (708)865-8071** with any questions.

Thank you and we pray that God blesses us with a good year of faith formation for our children.

Sister Christine Nantaba, IHMR  
***Religious Education Administrator***  
Mary, Mother of Divine Grace Parish  
Westchester, IL

[cnantaba@divineprovidenceschool.org](mailto:cnantaba@divineprovidenceschool.org)

708.562.2258 Ext. 32