



Sunday Morning
9:45 am - 11:15 am

K - 6th Grade &
Year 1 & Year 2 - Confirmation program

By registering your child, you give permission for any photograph taken of your child & their name to be published on our website, in our parish bulletin, local newspapers and bulletin board.

If you do not grant permission, you must submit a written letter stating otherwise.

Grade School and Confirmation
St. Mary Religious Education
302 Fisk Ave. DeKalb, IL 60115

Date: _____

FAMILY NAME: _____ Spouse: _____ Spouse: _____

Address: _____ City/Zip _____ Registered Parishioner?
YES / NO

PHONE # HOME: _____ WORK: _____ CELL: _____

(please print legibly)

E-Mail Address: _____ do you prefer being contacted by e-mail?
YES / NO

1) STUDENT'S NAME: _____ School _____
(First & Last) _____ Grade in fall: _____

School _____ Birth date: _____ City & State of Birth _____

Learning disabilities, allergies and other medical problems (please explain)

Mother's MAIDEN Name: _____ Birth Father's Name _____

If your child was in our program in the past year, sacrament info is not needed!

SACRAMENT INFO:

BAPTISM: Name & City/State of Church _____ Date: _____

FIRST RECONCILIATION: (if applicable) Name & City/State of Church: _____
Date: _____

FIRST COMMUNION: (if applicable) Name & City/State of Church: _____
Date: _____

2) STUDENT'S NAME: _____ School _____
(First & Last) _____ Grade in fall: _____

School _____ Birth date: _____ City & State of Birth: _____

learning disabilities, allergies and other medical problems (please explain)

Mother's MAIDEN Name: _____ Birth Father's Name _____

If your child was in our program in the past year, sacrament info is not needed!

SACRAMENT INFO:

BAPTISM: Name & City/State of Church: _____ Date: _____

FIRST RECONCILIATION: (if applicable) Name & City/State of Church: _____
Date: _____

FIRST COMMUNION: (if applicable) Name & City/State of Church:

Date: _____

3) STUDENT'S NAME: _____ **School** _____
(First & Last) _____ **Grade in fall:** _____

School _____ **Birth date:** _____ **City & State of Birth** _____

Learning disabilities, allergies and other medical problems (please explain)

Mother's MAIDEN Name: _____ **Birth Father's Name** _____

If your child was in our program in the past year, sacrament info below is not needed!

SACRAMENT INFO:

BAPTISM: Name & City/State of Church _____ Date: _____

FIRST RECONCILIATION: (if applicable) Name & City/State of Church: _____ Date: _____

FIRST COMMUNION: (if applicable) Name & City/State of Church: _____ Date: _____

4) STUDENT'S NAME: _____ **School** _____
(First & Last) _____ **Grade in fall:** _____

School _____ **Birth date:** _____ **City & State of Birth:** _____

learning disabilities, allergies and other medical problems (please explain)

Mother's MAIDEN Name: _____ **Birth Father's Name** _____

If your child was in our program in the past year, sacrament info below is not needed!

SACRAMENT INFO:

BAPTISM: Name & City/State of Church: _____ Date: _____

FIRST RECONCILIATION: (if applicable) Name & City/State of Church: _____ Date: _____

FIRST COMMUNION: (if applicable) Name & City/State of Church: _____ Date: _____

****If you are interested in Financial Assistance, please call the Formation Office 815-758-5432 ext. 110, Please understand that all aid is predicated on a regular, weekly Mass attendance. All requests will be kept in strict confidence.**

***Registration fee:** a \$30 Family registration is DUE at the time of registration. *Discount if paid before June 15 of \$25
****There will be an additional fee of \$35 for any student entering into our Sacrament Programs. (First Communion/Confirmation)**
This fee will be paid at the time of registration for the Sacrament at a later date.

All tuition is as follows for RE students.....

Tuition: 1 child=\$125.00
 2 children=\$250
 3 or more=\$350

You may make 1 full payment due October 1 or you may make 8 monthly payments due the 1st of each month starting October and ending May 1.

Registration Due \$30 or (\$25 if paid before June 15)

1 tuition payment paid in full: due October 1

8 monthly payments: 1st payment due October 1

All payments can be made electronically through our St. Mary Parish website. (www.stmarydekalb.org)

CATECHISTS and AIDES

If you would like to become a Catechist or Aide for RE, please call Annalisa McMaster at 758-5432 ext. 110.

****All Catechist/Aide CRITERIA: MUST attend weekly Mass and agree to attend at least 1 workshop per year towards certification in the Diocese of Rockford.****

**\$75 discount for Catechists will be applied to your tuition for children you have in our RE/Confirmation program.

**\$25 discount for Aides will be applied to your tuition for children you have in our RE/Confirmation program.