



Does your child need special help/attention or have special needs? Please be specific, i.e. allergies, hearing, vision, speech, ADHD, ADD, autism or other.

**Photo and Name Release Consent:** I hereby authorize and consent that the Church/School of The Immaculate Conception be permitted to use and publish for Parish and Ministerial use the name and likeness of my child/children. The likeness may include any photographic portraits, pictures, reproductions, made through any medium, including electronic media. I hereby release the Church/School of The Immaculate Conception from any liability in connection with such use. **Parent/Guardian Signature:** \_\_\_\_\_

**WILL YOU VOLUNTEER IN THE PROGRAM: AS A CATECHIST? \_\_\_\_\_ SUB? \_\_\_\_\_ OTHER? \_\_\_\_\_**

**Are you willing to be a Group Leader for Children’s Liturgy of the Word at 10:00am Mass on Sunday? (training provided)**  
Name \_\_\_\_\_ Telephone \_\_\_\_\_

**If you are registering children for the first time, indicate date and place of Baptism for each child. PLEASE ATTACH A COPY OF THE BAPTISM CERTIFICATE IF BAPTISM WAS NOT AT IMMACULATE CONCEPTION.**

<u>Name</u>	<u>Date of Baptism</u>	<u>Place of Baptism</u>
_____	_____	_____
_____	_____	_____

**Tuition:** Please make checks payable to Immaculate Conception Church. Tuition fees help provide teaching and activity materials, books, videos, hospitality and help to heat, light and maintain our building.

**REGISTRATION FEE K-8: 1 Student \$85 2 Students \$100 3+ Students \$110**

**ADDITIONAL SACRAMENT FEE FOR: RECONCILIATION AND EUCHARIST \$40 per student**

**CONFIRMATION FEE: \$85 (COVERS YEARS ONE AND TWO)**

**In addition to tuition and fees, non-parishioners will be charged a \$30 non-parishioner fee per family.**

Payment in full enclosed \$ \_\_\_\_\_

One-half of Payment now \$ \_\_\_\_\_

Balance Paid by January 1 \$ \_\_\_\_\_

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**FOR OFFICE USE ONLY:**

Registration Date: _____	Payment Date: _____	Amount: _____	Check # or Cash: _____	Received by: _____
	Payment Date: _____	Amount: _____	Check # or Cash: _____	Received by: _____