2012-2013 ST. BEDE RELIGIOUS EDUCATION PROGRAM

(Please	Print)					
Fa	amily Name					
	-	Last Name				
			Mother's First			
						
Cit			State	Zip		
	one(s):					
Hor	• •					
Cel	ll: Mom		Dad		<u> </u>	
Wo	ork: Mom		Dad			
	mail:					
We	e will be using e-m	ail ONLY to comm	nunicate (unless requ	ested by you) please	provide best address to เ	use.
Student(s):						
First Name		Date of Sex			d. Church, Location & Year	_
		Birth M/F	2012-13 Baptism	Reconcilia	tion First Comm	nunion
						
						
	•					
						
DIEACE	()CUNDAY CI	IACC ()WED	NECDAVCIACC ()	CHMMED CLASS ()	HOME SCHOOL ()H	TCH SCHOOL
PLEASE CHECK	()SUNDAY CI 9:30 TO 10:50	\	NESDAY CLASS () O 8 PM	SUMMER CLASS () 8:30 AM TO NOON		IIGH SCHOOL ased on Candidates
PREFEREN			e-K or K	6/18 THRU 6/29	1102 010	isca on Canadates
MUST ATTEND ALL CLASSES						
	No Pre-K, K, 2 nd , Pre-Sac, or 8th					
		As part of the RE Pi	ogram it is expected that	each family will attend M	ass weekly.	

Terms & Conditions

Please read each section carefully; Program Tuition, Sacramental Fees & Non-Registered Member Fee, Service Hours, RE Volunteer Incentive Program, Program Authorization, Release Agreement and Signature. Your signature indicates an agreement with the Terms & Conditions of the St. Bede Religious Education Program (St. Bede RE Program).

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Program Tuition

- I understand this registration form is a contract for my child(ren)'s attendance at the St. Bede RE Program, and that I am liable for the entire tuition cost. Further, I am responsible for payment of all tuition and sacramental fees for my child(ren)'s program. I am the legal parent/guardian and have the authority to enter into this agreement.
- This registrant agrees to make full payment to St. Bede RE Program no later than the due date. Returned checks or declined credit card payments will incur at \$35 administrative charge.
- I understand I am in full control of my payment schedule and if at any time I decide to make any changes to my payment option, I must notify the St. Bede Re Program in writing and receive agreement with the St. Bede RE Office.

() PAY IN FULL OPTION:

	FALL RETURNING STUDENTS		SUMMER RETURNING STUDENTS		NEW/HOME SCHL/HIGH SCHL STUDENTS		
	Prior to	After	Prior to	After	New	Home	High
	6/15/2012	6/15/2012	5/1/2012	6/15/2012	Students	School	School
1	\$188	\$246	\$188	\$246	\$188	\$110	\$100
2	\$282	\$358	\$282	\$358	\$282	\$225	\$200
3	\$331	\$429	\$331	\$429	\$331	\$335	\$300

() INSTALLMENT PAYMENT OPTION: (Shown total amount including premium for installment payments and recordkeeping.)

	FALL RETURNING STUDENTS		SUMMER RETURNING STUDENTS			
	Prior to	<i>After</i>	NOT AVAILABLE	New	Home	High
	6/15/2012	6/15/2012		Students	School	School
1	\$244	\$320		\$188	\$143	\$143
2	\$366	\$465		\$282	\$292	\$260
3	\$430	\$557		\$331	\$435	\$390

INSTALLMENT PAYMENTS:

- ½ DUE UPON REGISTRATION
- BALANCE DUE IN EQUAL MONTHLY PAYMENTS FROM FIRST MONTH AFTER REGISTRATION THROUGH 3/31/2013.

SACRAMENTAL FEES & NON-REGISTERED MEMBER FEES:

- In Sacramental years (2nd & 8th) there is an additional \$75 Sacramental Fee per child that will be charged later in the year to cover additional costs related to both First Communion & Confirmation.
- If you are not a registered member of St. Bede Parish there is an additional \$75 per child OUT-OF-PARISH FEE for our program.
- If you are interested in joining St. Bede Parish you can complete a membership form obtained from RE or the Parish Office.

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Service Hours

- I agree that I will donate 5 hours of my time to St. Bede Parish and the Religious Education Program.
- Service Hours are to be completed from April 1, 2012 through March 31, 2013.
- Review the St. Bede Religious Education Service Hour Policy for complete explanation.
- I agree that should I not work these 5 service hours I will pay \$25/hour for each hour not worked.
- I agree that I will **provide a check** in the amount of \$125 payable to St. Bede Religious Education with my Tuition form that will be held until either:
 - o I have completed my mandatory service hours of 5 per school year and turned in my service hour card (the check being held will then be returned to you).

OR

- o April 1, 2013, which is the end of the school term and the check will be submitted for payment to cover mandatory uncompleted service hours.
- As a volunteer that will be working with students you also agree to be, if not already, Virtus trained (Protecting God's Children) complete proper forms for Background Screening, Code of Conduct and complete application on Archdiocese of Chicago website for volunteers.
- You can obtain your hours by working any St. Bede or RE Event or Fundraiser. Watch the Parish Bulletin or E-mails sent to parents.

RE Volunteer Program Incentives

- As a volunteer in the RE Program; as a Catechist, Asst. Catechist, Office Helper, Prayer Parent, Art Parent, Service Project Coordinator (7th & 8th grade projects), Fundraising Committee, chairing at least one event per year and helping with others. For any of these positions you will receive a 50% reduction in Regular Tuition costs for your child(ren) that are in the program and it satisfies your service hour requirement.
- You MUST attend 95% of the sessions and MUST get your own substitute if you work in the classroom when absent, be Virtus trained and complete necessary background check. See Service Hour Policy for specific details.

PLEASE CHECK WHERE YOU CAN HELP:

Tuition Incentive Positions:	
() Catechist Grade () Asst. Catechist Grade () Office H	lelp During Class () Prayer Parent () Art Paren
Preference: () Sunday () Wednesday () Summer	
() Service Project Coordinator () Fundraising Committee	
	D 2 C4

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Program Authorization

- Parental Responsibility Statement: I believe that, as a parent, I have the primary responsibility for the religious education of my child(ren). At the same time, I understand that I need the help of the parish staff and catechists to provide the programs and directions to fulfill this responsibility. Therefore, I hereby agree to cooperate fully with and be bound by the spiritual, educational, financial, and parental requirements of the St. Bede RE Program.
- I also understand that continual non-compliance with the norms as established by St. Bede RE Program could cause denial or access to the program.

Release Agreement

- I give permission to the St. Bede RE Program staff to have my child treated by a doctor or hospital in case of medical emergency.
- Please use the space below to inform us of any *Custodial*, *Religious*, *Physical*, *Educational or other Special Needs* of your student(s) that we should be aware of and keep in mind or if there are NONE please check the box below:

() NONE

Signature

- Your signature indicates an agreement with the Terms & Conditions of the St. Bede Religious Education Program or St. Bede RE Program.
- I understand failure to pay all 2012-2013 tuition and fees when due will result in my child's exclusion from the RE Program and that St. Bede will take legal action against one or both of the undersigned in order to collect these costs.
- I hereby release and indemnify St. Bede Parish, its staff and its volunteers, and the Catholic Bishop of Chicago, a corporation sole, from any and all liability arising from claims of any kinds or nature whatsoever from my child(ren)'s participation in the St. Bede RE Program.

Responsible Party (Print)		Responsible Party (Print)	Responsible Party (Print)		
Responsible Party Signature	Date	Responsible Party Signature	Date		