St. Bruno-St. Richard Faith Formation Registration 2022-2023

Registration Information - To reserve a place, please register by doing the following:

- Return this form to the Faith Formation Office with *tuition deposit*. Simply mail forms St. Richard Parish Office 5030 Kostner Avenue, Chicago, IL 60632 or ATTN: FF Registration or visit the Parish Office.
- New families and families, who haven't already done so, need to provide a copy of their child's baptismal certificate. alone with this form and tuition deposit.

 REQUIRED TO
 Tuition Deposit \$50 - one student
 \$75 - two students
 \$100 - three or more students

 ACCEPT REGISTRATION
 Baptismal Certificate on file for student
 Communion Certificate if applicable

Payment options – Payment in Full Cash or check please make checks payable to "St Bruno and Richard Parish."
 Monthly Payments (Due second Wednesday of each month)
 Online payments are available via <u>Give Central Payment Page</u>.

FAITH FORMATION CLASSES WILL BE AT RICHARD SCHOOL

Tuition fee (per family)	Sacrament fee (per student)	
🗆 one student \$225.00	🗆 Communion \$50.00	
🗆 two students \$325.00	Confirmation \$75.00	Wednesday – 6:30pm – 8:00pm
□ three or more students \$425.00		

FAMILY INFORMATION

What language is spoken at home?	🗆 English	🗆 Spanish	Polish	🗆 Other	
Register family at St Bruno- St. Richard					
Child's Last Name			Primary Phone		
Street		City		Zip	
Father's Name		Father's	s Email		
Father's Phone Numbers : Home		Cell		Work	
Mother's Name					
Mother's Phone Numbers	Mother's Email				
Home	Cell		Work		
Marital status of parents	Single 🗌 married	🗌 divorced	Place of marriage		
Tutor/Guardian's Name		Tutor/Gua	rd. Email		
Home	Cell		Work		
If yes, please provide Name: STUDENT(S) INFORMATION – First child Boy Girl Student's Full Name	if this child is new t	o the program	, please fill out iten	ns with an (*)	&R FFP from last year
Birthdate					
Public School Attending		FI	F Grade Fall of 2022	2	
*Date Baptized	*Chu	urch			
*First Communion	*Church *Church *Church *Church				
Does your child have any medical co If yes, please describe	ndition (diabetes, as	sthma, etc.) we	e need to be aware	e of? Ye	es 🗌 No 📃
Please list any medications your chil					
Does your child have any food allerg					
If yes, please describe what foods n					
Does your child have any special phy					5 🗌 No 🗌
If yes, please describe your child's n	eeds and the best w	ay we can acco	ommodate those n	eeds	

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Second Boy Girl		Returning to St. B &R FFP from last year				
Birthdate						
		FF Grade Fall of 2022				
*Date Baptized	*Church					
*First Communion	*Church					
Does your child have any me	dical condition (diabetes, asthma, etc.) we	e need to be aware of? Yes 🗌 No 🗌				
If yes, please describe						
Please list any medications y	our child is taking					
Does your child have any for	od allergies? Yes 🗌 No 📋					
If yes, please describe what	foods need to be avoided					
Does your child have any spe	ecial physical or educational needs that we	e should be aware of Yes 🗌 No 📋				
If yes, please describe your o	hild's needs and the best way we can acco	ommodate those needs				
Third Child Boy Girl	New to St. Bruno-St Richard FFP	Returning to St. B &R FFP from last year				
Student's Full Name						
Birthdate	Birthplace					
Public School Attending		F Grade Fall of 2022				
*Date Baptized	*Church					
*First Communion						
Does your child have any me	dical condition (diabetes, asthma, etc.) we	e need to be aware of? Yes 🗌 No 🗌				
If yes, please describe						
Please list any medications y	our child is taking					
Does your child have any foc	od allergies? Yes 🗌 No 📋					
If yes, please describe what	foods need to be avoided					
Does your child have any spe	ecial physical or educational needs that we	e should be aware of Yes 🗌 No 📋				
If yes, please describe your o	hild's needs and the best way we can acco	ommodate those needs				
submitting in writing.	e above children be allowed to participate	h any photos taking during FF course. Revocation must be in the Bruno- Richard FFP and all its activities				
Confirmation. I authorize enrollment for m		ceive the Sacraments of First Communion and, or nation Program. I agree to pay tuition and fees as stated o I/ren and any transfer forms if necessary.				
		Parent Signature				