

2022-2023 Religious Education Enrollment Form

Divine Mercy Parish – 44 East Main Street– Frostburg, MD 21532

		Tuition amount included:	
Family Last Name:		Home Phone:	
Home Address:			
Father's/Guardian Name:		Father's Cell:	
		Father's Email Address:	
Father's Address (if different)			
Mother's/Guardian Name:		Mother's Cell:	
Mother's Maiden Name:		Mother's Email Address:	
Mother's Address (if different)			
Emergency Contact:		Emergency Contact Phone Number(s):	
STUDENT #1 INFORMATION		Religious Ed. Site <i>(please circle one)</i> St. Joseph or Home Based	
Child Name:		Sacramental Details <i>(Provide date and location)</i>	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		<u>Sacrament</u>	<u>Date</u>
		<u>Location</u>	
Birthdate:		Baptism:	
Grade:		Eucharist:	
Special Needs (including medical, learning, and food allergies):		Reconciliation:	
		Confirmation:	
NOTE: If your child was baptized outside of this parish, and you have not already supplied us with a copy of your child's baptismal record, please include a copy of the certificate with registration.			
STUDENT #2 INFORMATION		Religious Ed. Site <i>(please circle one)</i> St. Joseph or Home Based	
Child Name:		Sacramental Details <i>(Provide date and location)</i>	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		<u>Sacrament</u>	<u>Date</u>
		<u>Location</u>	
Birthdate:		Baptism:	
Grade:		Eucharist:	
Special Needs (including medical, learning, and food allergies):		Reconciliation:	
		Confirmation:	
NOTE: If your child was baptized outside of this parish, and you have not already supplied us with a copy of your child's baptismal record, please include a copy of the certificate with registration.			

OFFICE USE ONLY

Date Received: _____ Tuition DUE: \$ _____ Tuition PAID: \$ _____ Initial: _____

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STUDENT #3 INFORMATION		Religious Ed. Site <i>(please circle one)</i> St. Joseph or Home Based		
Child Name:	Sacramental Details <i>(Provide date and location)</i>			
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sacrament	Date	Location	
Birthdate:	Baptism:			
Grade:	Eucharist:			
Special Needs (including medical, learning, and food allergies):	Reconciliation:			
	Confirmation:			
	NOTE: If your child was baptized outside of this parish, and you have not already supplied us with a copy of your child's baptismal record, please include a copy of the certificate with registration.			

STUDENT #4 INFORMATION		Religious Ed. Site <i>(please circle one)</i> St. Joseph or Home Based		
Child Name:	Sacramental Details <i>(Provide date and location)</i>			
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Sacrament	Date	Location	
Birthdate:	Baptism:			
Grade:	Eucharist:			
Special Needs (including medical, learning, and food allergies):	Reconciliation:			
	Confirmation:			
	NOTE: If your child was baptized outside of this parish, and you have not already supplied us with a copy of your child's baptismal record, please include a copy of the certificate with registration.			

TUITION is \$40 for first child plus \$10 for each additional child. Scholarships and waivers are available to all on request and are automatically given to grandparents and other relatives who have been given guardianship of children. If you can pay fees, please include them with registration form.

AUDIO/VISUAL TAPING & PHOTOGRAPHY CONSENT FORM

On occasion, at Divine Mercy Parish, video and/or audio recording and photographs could be taken of children/youth during church & diocesan sponsored activities, such as VBS, Religious Education Sessions, retreats, Masses, etc. These are utilized for parish website(s), event promotion, flyers, and other printed media. Occasionally, printed photos are posted on bulletin boards in the Church. I consent to the use of such materials in which my children may appear. I release the staff and volunteers of Divine Mercy and the Archdiocese of Baltimore from any liability connected with the use of pictures or voice recording as part of any of the above or similar activities.

I understand that if, for whatever reason, at any point in time, I decide to revoke this agreement, and I so notify the parish in writing, all references to my child/youth (i.e., name, likeness, and/or photographic image) will no longer be used. I understand that web page references and web page photographic images will be removed within thirty (30) days of the written notification.

[I understand that the Parish is not responsible for access to the internet information or downloads made by users using the web prior to this removal of web references (i.e., name, likeness, and/or photographic image).]

I further understand that my child's/children's/youth's name, likeness, and/or photographic image may continue to be used in any publication already printed or published prior to my revocation of the consent provided herein. At our parish, we do not identify children when pictures are posted on any social media or our website, though parents may choose to tag with a name.

Signature of Parent or Legal Guardian: _____ **Date:** _____