



**Due by Aug. 22, 2021**

Date \_\_\_\_\_

Student's Name \_\_\_\_\_  
(Last Name) (First Name) (Nickname)

Address \_\_\_\_\_ Home Phone: \_\_\_\_\_  
(Number and Street) (City) (Zip)

Parent e-mail address(es) \_\_\_\_\_

Date of Birth \_\_\_\_\_ School Grade in Sept. 2021 \_\_\_\_\_ Rel. Ed. Grade in Sept. 2021 \_\_\_\_\_

Name of School for 2021-22 \_\_\_\_\_

Which program will you be attending: Regular classes \_\_\_\_\_ At-Home / Sunday Program \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Maiden Name (Needed for Sacramental Record Books) \_\_\_\_\_

Mother's work & cell phone: Cell # \_\_\_\_\_ Cell Provider (Verizon etc) \_\_\_\_\_ Work # \_\_\_\_\_

Father's work & cell phone: Cell # \_\_\_\_\_ Cell Provider (AT&T etc) \_\_\_\_\_ Work # \_\_\_\_\_

With whom does the student live? (Circle One):  
 Both parents    Mother Only    Father Only    One parent, one step-parent    Other \_\_\_\_\_

How should correspondence be addressed: (Mr. & Mrs.)    (Mrs.)    (Mr.)    (Ms.)    Other \_\_\_\_\_

Should correspondence be sent to multiple parties? If so, please give instructions: \_\_\_\_\_

Are you a registered parishioner at St. Leo the Great Parish?    Yes    No    Want to register  
 If not, to which parish do you belong? \_\_\_\_\_

**Complete this section only if your child was not in St. Leo's Religious Education Program last year. If your child was not in St. Leo's Religious Education Program last year and was baptized at a parish other than St. Leo's, please attach a copy of his/ her baptismal certificate. (Required for Gr. 1-10 ONLY)**

**Sacraments Received:**

Parish, City, & Date of Baptism \_\_\_\_\_

Parish, City, & Date of Reconciliation \_\_\_\_\_

Parish, City, & Date of Eucharist \_\_\_\_\_

Brothers and Sisters (Names & Ages): \_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(If parents cannot be reached)    (Name)    (Phone #)    (Relationship)

<b>Fee: (Check One)</b>	<b>Parishioner Fee</b>	<b>Gr. 1-10 Non-parishioner Fee</b>
_____ Check _____ Cash	\$60- 1 child Gr. 1-10	\$90 per child for
Include \$10/family late fee after	\$100- 2 children Gr. 1-10	Gr. 1-10 ONLY
Aug. 22, 2021 (Gr. 1-10 ONLY)	\$140-3 or more Gr. 1-10	\$30 / family - Good
Full or partial tuition waiver for	\$30 / family - Good Shepherd	Shepherd Program
financial hardship available by request	Program (Ages 3-5)	(Ages 3-5)

*Please complete  
the other side  
of this form*

Student Full Name \_\_\_\_\_

Please inform us of any medical conditions, learning disabilities, etc. that might bear on your child's performance in class or behavior, or that would better enable us to serve your child. (for example-- epilepsy, allergies, diabetes, reading difficulties, A.D.H.D., etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*\*\*\*\*

### Video/ Photograph/ Media Release

Permission is requested for your child to be photographed or videotaped at classes/ events associated with St. Leo the Great Parish and the Religious Education Program. These photos, videos, etc. may be used in the church bulletin, on the parish website or published in the newspaper or other publications. The videos or pictures may be used for information or educational purposes regarding the programs or events at St. Leo the Great Parish.

Yes, I give my permission for my child to be photographed, videoed, etc.

I do not give my permission for my child to be photographed, videoed, etc.

\*\*\*\*\*

### Annual People Safety Awareness Training for Children

In today's society we are aware of the increased need to protect our children from harm. In an effort to ensure the well-being of our young people, the Diocese of Buffalo trains and screens all adult staff and volunteers that work with youth. Additionally the Diocese has implemented a program to train our children in "people safety". This training, mandated by the Diocese of Buffalo, will be conducted for the religious education students at St. Leo the Great Parish during a regular class session. The training is a way for your child to learn to recognize and respond appropriately and assertively to personal safety issues at an age appropriate level.

Please feel free to call me at 835-8905 x 12 if you have any questions, concerns, or would like additional information regarding this instruction.

Please indicated below whether or not you wish for your child to take part in this age-appropriate personal safety session.

I give my child permission to take part in the annual People Safety Awareness session at St. Leo's.

I ask that my child be excused from attending the People Safety Awareness session at St. Leo's.

\*\*\*\*\*

\_\_\_\_\_  
Signature of Parent/ Guardian

\_\_\_\_\_  
Date