

March, 2010

Dear Parent,

Enclosed please find the registration materials for the 2010-11 school year. New students need to enclose a **copy** of their baptismal certificate and a *New Student Profile*. If they were baptized at St. Norbert, please indicate this on the profile sheet and no certificate will be needed.

Spring, June and July Intensive and Fall class sessions will be held at St. Norbert Parish, but the facilities of OLB will be used on occasion. Please see the enclosed schedule of tuition and book fees. This is for your information only. **Do not send any payment with this form!** We are not raising any fees this year. All payments **must** be made through Tuition Management Systems. Please read the enclosed important information sheet for financial details, directory, medical and photo releases and our new Campus Notification Registration (NIXLE). Please consider supporting the program as a catechist, substitute catechist, hall monitor or office helper.

In planning for next year we are offering a choice of day and time for class.

K - 5	Monday	4:30 - 5:45 P.M.
1 - 8	Monday	6:15 - 7:30 P.M.
K - 8	Wednesday	6:15 - 7:30 P.M.

Jr. Hi Intensive option: choice of one of the following: **plus 11 Sundays 6:45 - 8:15 P.M.**

Spring Intensive: 6, 7 & 8	5 Mondays: April 26, May 3, May 10, May 17, May 24,	4:00-6:15 P.M.
Jr. Hi Intensive I: 6, 7 & 8	June 21-25	1:30 - 3:45 P.M.
Jr. Hi Intensive II: 6, 7 & 8	July 26 - July 30	9:30 - 11:45 A.M.

See Further Information on the Intensive Program on the Reverse Side.

Class sizes are limited. Register early to assure your choice of day and time. Registration forms are required each year and are processed on a first come, first served basis for all sessions, including Jr. Hi. Intensive.

Please be aware of our registration dates. We request that you **register for the Spring intensive program by April 16. Summer Intensive forms are due by May 14. Fall session registrations are due by June 11.**

Registrations will not be processed until April 5.

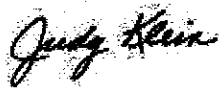
Regular attendance at class is vital to successful faith formation. Choose your day carefully so conflicts will be kept to a minimum. Since every year is important, children who miss a grade will be required to do home schooling assignments before being re-admitted to their grade level. Two years of class attendance is required for our sacramental programs, i.e., first and second grade for First Eucharist and Confirmation I and II for Confirmation. Religious education takes place primarily in the home. It is important that your child is sharing in your faith and Catholic traditions. Participation in the celebration of the Mass is an important element in our faith life. We encourage your attendance with your children.

Please sign and return the directory, medical release and photo approval form with your registration form.

Your name will **not** be included in the directory if we do not receive this form.

We are looking forward to a wonderful year with your children.

Sincerely,



Judy Klein
Director, Religious Education
Enc.

Jr. Hi Intensive Information

The Jr Hi Intensive program is an **alternative** to our weekly class sessions. Students in 6th, 7th and 8th grades meet for five two hour sessions during spring or summer and 11 classes on Sunday evenings. The students are encouraged to attend 5:30 PM mass with their parents; have pizza for dinner with their classmates and have class from 6:45 to 8:15 PM.

Students must be committed to attending every class unless seriously ill. Missed classes must be made up. Do not register for this option if you have Sunday conflicts. The Spring session is not suitable for students in sports or activities on Monday afternoons. Class dates are provided way in advance so you can make plans accordingly. Participation in the Intensive Program for this current year does not guarantee your place for the 2010-11 year. Registrations are dated as they come into the office and students are placed on a first come basis.

Registrations will not be processed before April 5.

The longer class session will require a high level of participation and cooperation and might not be suitable for all students. Teachers are still needed for this option. Please call the office if you are interested.

The Intensive dates are a choice of one of the following:

6, 7 & 8 grades	Spring: 5 Mondays, 4 pm to 6:15 pm
	April 26, May 3, May 10, May 17, May 24
6, 7 & 8 grades	June 21 – 25: 1:30 pm - 3:45 pm
6, 7 & 8 grades	July 26 - July 30: 9:30 am - 11:45 am

The tentative Sunday dates are: FIRST SEMESTER

September	12 & 26
October	17
November	7 & 14
December	5

SECOND SEMESTER

January	9 & 30
February	13: 8 th gr. only
March	20 (no 8 th grade)
April	10 (no 8 th grade)

Confirmation students will have additional commitments.

PLEASE READ! IMPORTANT INFORMATION

1. Financial

This year all payments (tuition and fees) will be collected by Tuition Management Systems. Families already in our program are enrolled in TMS and do not have to submit another form. Families new to our program will need to complete a TMS form, available in the RE Office. After registrations are received by the RE Office, TMS will send each family an invoice. If the amount is paid in full by October 10, there are no additional charges. If a family chooses to pay their fees in six monthly installments, there is an additional charge of \$30.00. We have been encouraged by the archdiocese to have our funds collected by a professional company. This system also provides a means of stretching out payments in more manageable amounts. We are not increasing tuition or fees. Please complete the financial form and return with your registration.

Every child should have the opportunity to grow in faith and attend Religious Education classes. Tuition assistance will be provided to those who request it. Applications are available from the Religious Education office.

2. Emergency Notification System

This year we are initiating an emergency notification system called Nixle. When we need to cancel class or give you last minute information we will notify you via a text to your cell phone or by email. Please register at www.Nixle.com. If you do not register, you will not be notified.

3. Medical Release

Please sign and return the medical release form so that we can obtain medical services for your child in an emergency.

4. Directory and Photo Release Form

Please sign and return this form with your registration to be included in our directory, and to give permission for your child to be photographed.

St. Norbert Parish Religious Education
 1809 Walters Avenue, Northbrook, IL 60062
 (847) 272-3086
 reled@stnorbertparish.org

FAMILY NAME _____

2010-2011 Religious Education Registration Form

Mother's Name _____
 Last Mother's (Maiden) First Home phone

_____ Email address (required) _____ Mother's Cell phone

Address _____
 City State Zip Work Phone

Father's Name _____
 Address (if different) Cell phone

Emergency Contact: _____
 Name Relationship Phone

MONDAY:

Grades K -5: 4:30 - 5:45 pm
 Grades 1 - 8: 6:15 - 7:30 pm

WEDNESDAY:

Grades K - 8 6:15 - 7:30 pm

INTENSIVE: Grades 6 - 8 option:

Spring: 5 Mondays and 11 Sunday sessions
 Summer week and 11 Sunday sessions - dates listed in letter
 Sunday class: 5:30 Mass, Pizza Supper, Class time: 6:45 - 8:15 pm

Choose 1 week:

Spring: April 26, May 3, May 10, May 17, May 24: 4:00 PM - 6:15 PM
 INT 1: Week of June 21 - 25: 1:30 PM - 3:45 PM
 INT 2: Week of July 26 - 30: 9:30 AM - 11:45 AM

REGISTRATIONS WILL NOT BE ACCEPTED BEFORE APRIL 5

Spring Intensive Registrations due April 17

Summer Intensive Registrations due May 15

Fall Registrations due June 15.

Please list the names of all the children that you are enrolling for Kindergarten through 8th grade for 2010-2011.

Indicate your choice for each child by writing in Mon 6:15, Mon 4:30, Spring, Int. 1 or Int. 2 in the appropriate box.

M/F	Student Name	Public School	GRADE in Fall	Choose Day	Please Leave Blank below

Special health or learning concerns: _____

1 Family Contact Information Account Number (if previously enrolled with TMS): _____

Payer's Name: Mr. Mrs. Ms. _____
First Middle Initial Last

Payer's Date of Birth: _____ / _____ / _____ Payer Telephone: (____) _____ - _____

Secondary Contact: Mr. Mrs. Ms. _____
First Middle Initial Last

Payer Street Address: _____ Apt: _____
 City: _____ ST: _____ Zip: _____

Payer Email: _____

Student 1: _____
 Student 2: _____
 Student 3: _____
 Student 4: _____

2 Plan Options:

1 Installment:
 No Enrollment Fee
 Due 10/10/2010

6 Installments:
 \$30 Enrollment Fee
 Due 10/10/2010 to 3/10/2011

PLEASE NOTE: EACH YEAR, YOU WILL BE AUTOMATICALLY REENROLLED AND INCUR THE APPLICABLE ENROLLMENT FEE FOR THIS PLAN UNTIL GRADUATION OR CANCELLATION. ENROLLMENT FEES ARE SUBJECT TO CHANGE IN FUTURE ACADEMIC YEARS.

3 Enrollment Fee Payment Options: For Enrollment Fee Amount, Refer to Section 2.

A check is enclosed for the enrollment fee. (Make check payable to Tuition Management Systems.)

Charge the enrollment fee to my credit card: VISA® MasterCard® DISCOVER® American Express®

Credit Card #: Exp: ____ / ____ /20 ____

4 Optional Authorization Agreement for Automatic Payments

I hereby authorize Tuition Management Systems, a division of KeyBank National Association ("TMS"), to initiate debit entries to my account at the financial institution indicated below for the amount due on my Monthly Payment Plan on the date the payment is due. All transfers will be made on the due date of the payment or on the next processing day if the transfer date is a non-processing day for TMS.

TMS may, at its option, discontinue automatic funds transfers from the account if I fail to maintain sufficient funds in the account to cover the payments required. This authority shall remain in full force and effect until TMS is notified by me by telephone or in writing to cancel it in such time as to afford TMS and the Financial Institution a reasonable opportunity to act on it.

Checking/Statement Savings (circle account type) Account #: _____

Financial Institution Routing #: Financial Institution Name: _____

I will be notified by mail of the date the automatic payments will begin. Until that time, I will make payments by check or contact TMS for alternative arrangements. I understand that it is my responsibility to ensure that there are sufficient funds in the account to cover any debit authorized and to ensure that payments are made on time. **PLEASE NOTE: EACH YEAR, YOU WILL BE AUTOMATICALLY REENROLLED AND INCUR THE APPLICABLE ENROLLMENT FEE AND BANK WITHDRAWALS FOR THIS PLAN UNTIL GRADUATION OR CANCELLATION. ENROLLMENT FEES ARE SUBJECT TO CHANGE IN FUTURE ACADEMIC YEARS.**

5 Payer Signature: I hereby agree to any _____ Date ____ / ____ /20 ____
 and all information and agreements noted above: Payer Signature

SCHOOL USE ONLY

1. Tuition	\$ _____	9. Installments Paid At School (if any):	\$ _____
2. + Fees/Other	\$ _____		
3. = Total Expenses	\$ _____		
4. - Grants/Financial Aid	\$ _____		
5. - Scholarships	\$ _____		
6. = Total Plan Amount:	\$ <input type="text"/>		
7. ÷ 1 or 6	_____		
8. = Installment Amount	\$ _____		

Notes: _____

_____ Date ____ / ____ /20 ____
 Administrator Signature

PLEASE RETURN THIS FORM WITH REGISTRATION PAPERS

2010-2011 RELIGIOUS EDUCATION TUITION SCHEDULE

FAMILY NAME _____ Parish: _____ St. Norbert
_____ Our Lady of the Brook
_____ Other

PLEASE DO NOT SEND ANY MONEY AT THIS TIME; TMS WILL BILL YOU

This sheet is for your information only; we cannot accept any payments.

Book & Materials Fee per Child \$ 55.00 _____

Sacrament Activity Fee/Intensive Dinner fee

Confirmation (Grade 8) \$ 65.00 _____

Communion Fee (Grade 2) \$ 25.00 _____

Intensive fee \$ 40.00 _____

TOTAL: _____

TUITION - REGISTERED PARISHIONERS:

One Child \$ 245.00 _____

Two Children \$ 480.00 _____

Three or more children \$ 645.00 _____

TOTAL: _____

TUITION - OUT OF PARISH:

One Child \$ 500.00 _____

Two Children \$ 800.00 _____

Three or more children \$ 1,150.00 _____

TOTAL: _____

St. Norbert Religious Education

March, 2010

Dear Parent,

Please note that the following must be signed and returned to the RE office.

MEDICAL RELEASE

In the event that the undersigned cannot be reached and in the judgment of the Director of Religious Education or other appropriate staff member, there is a necessity for immediate examination and/or treatment of my child, I hereby request and authorize any of the aforesaid personnel to obtain for my child such medical services as are deemed necessary. I agree to assume the financial responsibility for any diagnosis or treatment and for medication deemed necessary.

Parent Signature

Date

Please sign and indicate your agreement for the Religious Education 2010-11 family directory.

Please publish our name, address and phone number in the R.E. Directory: Yes _____ No _____

I give my permission for my child to appear in class photos: Yes _____ No _____

Family Name: _____
(please print)

Signature: _____

Date: _____

St. Norbert Religious Education

Student Profile for NEW Students

PLEASE REMEMBER TO INCLUDE A COPY OF THE BAPTISMAL CERTIFICATE.

If your child was baptized at St. Norbert, we do not need a copy of the certificate.

Additional Profiles can be obtained in the Parish Office, by calling the office at 272-3086 or by making a copy.

BAPTISMAL NAME OF STUDENT

ADDRESS _____ **PHONE** _____

DATE OF BIRTH _____ **PLACE OF BIRTH** _____

DATE OF BAPTISM _____ **CHURCH** _____
City State

ADDRESS OF CHURCH _____
Number Street City State Zip

DATE OF FIRST COMMUNION _____ **CHURCH** _____

DATE OF FIRST RECONCILIATION _____ **CHURCH** _____

PREVIOUS FORMAL RELIGIOUS EDUCATION (CIRCLE YEARS COMPLETED)

K - 1 - 2 - 3 - 4 - 5 - 6 - 7 - 8

Father's Name _____ **Occupation** _____

Religion _____

Mother's Name _____ **Occupation** _____

First Maiden

Religion _____

Any HEALTH CONCERNS _____

Any LEARNING PROBLEMS _____

St. Norbert Parish Religious Education Program

2010-11 VOLUNTEER FORM

Volunteers are essential to our program. Please consider joining us in working with the children. Please note: New Archdiocesan regulations require all volunteers working with children three times a year or more to register for a background check and attend a 3 hour seminar on protecting our children.

Please indicate all areas of interest:

Teaching a class _____

Classroom aide _____

Substitute teaching _____

Classroom project helper _____

Helping with events _____

(Masses, Celebrations, pageants, etc.)

Being a Hall Monitor _____

Office Helper during class time _____

Sacramental Events:

Tutor _____

HOSPITALITY: Be part of a committee to help with receptions.
Examples of some of the events are:

Reconciliation reception _____

3rd grade mass reception _____

Sharing a Meal Celebration (2nd grade parents) _____

2nd grade level Mass reception (2 weeks after FHC) _____

Confirmation family brunch (8th grade parents) _____

Confirmation Reception (7th grade parents) _____

NAME: _____

Telephone No. _____ **E-mail Address:** _____

Children's grades & class days & times _____