

Religious Education Program of Owatonna

Parishes of Sacred Heart & St. Joseph, 730 S. Cedar Ave, Owatonna, MN 55060 ☎ 507-446-2302

2018-2019 Registration and Tuition Agreement

Parent/Guardian Information:

 Father's Name (Religious affiliation)

 Mother's Name (Religious affiliation)

 Address

 Address (if different)

 City State Zip

 City State Zip

 Home Phone Work Phone

 Home Phone Work Phone

 Cell Phone

 Cell Phone

 Name of Parish

 Name of Parish (if different)

 Father's e-mail

 Mother's e-mail

Your privacy is important to us. Your email address will not be used in any matter not related to the REP/CYO Program. Email addresses help control program costs by reducing postage and improving communication. All of our regular communications are sent via e-mail. By providing your email address you are consenting to receiving program updates, notices and invitations.

Registration Information: Enter the information for the students that you are registering for the 2018-2019 School Year:

Grades 1-6 meet Wednesday evenings from 6:30-7:30pm Grades 7-10 meet Wednesday evenings from 6:30-8:00pm

Student's Name	Grade	M/F	Birth Date	School	Sacraments Received <small>*for baptism list parish, city, & state of parish or SH or SJ</small>
					Baptism – Reconciliation – Y N Eucharist – Y N
					Baptism – Reconciliation – Y N Eucharist – Y N
					Baptism – Reconciliation – Y N Eucharist – Y N

Please check the box for Sacramental Preparation Class if:

MY STUDENT(S) IN 3RD GRADE OR HIGHER HAS NOT RECEIVED THEIR 1ST RECONCILIATION AND/OR 1ST COMMUNION
 Sacramental prep classes will meet on Wednesday evenings from 6:30-7:30pm.

Registration Fee:

The financial impact of participating in the REP Program on our families is a primary concern of the Board and Staff. Tuition rates are set after careful analysis to provide the highest quality program for the least cost. The cost to educate a student through the REP program for 2018-2019 is \$480. This amount is subsidized by contributions from St. Joseph and Sacred Heart Churches, the CEMF Fund, and a variety of CYO fundraisers and donations.

2018-2019 Parishioner – Tuition Rates

# Students	Annual	Semi-Annual
1	\$140	\$70.00
2	\$185	\$92.50
3 or more	\$240	\$120.00

Non Parishioner – Tuition Rates

# Students	Annual	Semi-Annual
1	\$190	\$95.00
2	\$255	\$127.50
3 or more	\$290	\$145.00

Based on the above rates my total tuition amount due for the 2018 – 2019 school year is: \$ _____

A payment must accompany this registration. This amount will be applied to your tuition for the 2018-2019 school year. (Please make checks payable to REP/CYO) If paying by Credit Card, a 3.5% processing fee will be applied.

I wish to use the following payment schedule:

- _____ Full annual Payment - Payment is due by July 1st
- _____ Semi-Annual Payment - Payments are due July 1st and January 1st
- _____ Other - Contact the office for special arrangements/tuition assistance
- _____ I am interested in volunteering as a full time catechist or office helper for REP/CYO. I understand my tuition will be waived, and I will need to complete Virtus training as well as a background check.

Scrip Requirement:

In addition to the tuition rates, each family is required to participate in the Scrip fundraising program earning a minimum of \$50 in profits for REP. This balance will include activity from June 1, 2018 through May 30, 2019. After this date, all unearned amounts will become due immediately and part of your family's tuition responsibility for the current school year.

Media Release:

I consent to have photographs and/or videos of my son/daughter for use by the REP/CYO program. I understand that any photo/video would be used solely to publicize the program or to illustrate educational activities. If student's name is used, only their first name and last initial will be published. YES NO

Registration and Payment Agreement: *As members of the Catholic community, I/we acknowledge and understand the importance of continuous Faith Formation in the daily life of our family youth. By signing this registration form, I/we freely choose to enroll our family youth in the REP program and agree to abide by its rules and regulations. I/we agree to support the ongoing goals of the program by making tuition payments according to the schedule selected.*

Signature of Parent/Guardian Responsible for Payment of Tuition

Date

Return to Faith Formation Office with your first payment by July 1, 2018

*****Please call the office if your child has special needs*****

For Office Use Only:

Date Received: _____	CC/Cash/Check#: _____	Amount \$: _____
Date Received: _____	CC/Cash/Check #: _____	Amount \$: _____