St. John the Evangelist Catholic Church

Religious Education Registration
2026/2027

Tuesday Evenings:

6:15pm – 7:30pm | 1st - 8th Grade

For Office Use Only

Date: _____

Tuition: _____ Balance: _____

Check _____ Cash _____

On-line: _____ Intake Initials: _____

Family LAST Name

Family Address

City State Zip Code

Family is registered and are active parishioners of St. John the Evangelist Catholic Church:

YES - Envelope # _____ If NO, where is the family registered? _____

Father's Name	**Phone Number**	**Email Address**	**Religion**
Mother's Name	**Phone Number**	**Email Address**	**Religion**

Emergency Contact, other than parent/guardian:

Name: _____ Phone Number: _____

Please submit a copy of each child's Baptismal Certificate.

Tuition 2026/2027

One Child	**$60.00**
Two Children	**$90.00**
Three or more children	**$120.00**

Tuition may be paid in cash (exact amount), check (payable) to St. John the Evangelist, or online.

✞ Children are expected to be enrolled in Religious Education EVERY year, 1st Grade through 8th Grade.

✞ Parents are expected to fulfill their moral obligation to attend Mass weekly and bring their child/children to Mass weekly.

FIRST & LAST Name of Child	Gender	Age	Birthdate	Grade in School	Special Needs OR Concerns	Allergies OR Medical Conditions	Sacraments Received (Check)	Child attended Religious Education class last year?
1.							☐ Baptism ☐ Eucharist	YES or NO
2.							☐ Baptism ☐ Eucharist	YES or NO
3.							☐ Baptism ☐ Eucharist	YES or NO
4.							☐ Baptism ☐ Eucharist	YES or NO

Medical Treatment Release

Should the need arise to seek emergency medical assistance, treatment and/or transport for my child/children, and St. John the Evangelist Catholic Church is unable to reach myself or the other listed parent/guardian, or emergency contact, I agree to authorize said emergency medical assistance, treatment, and/or transport, and agree to pay for all expenses incurred and associated with said emergency medical assistance, treatment, and/or transport.

Parent/Guardian:
Printed Name _____Signature _____Date _____

Empowering God's Children – PERMISSION

In accordance with the requirements set by the Office of Safe Environments of the Archdiocese of Detroit, my child/children have permission to participate in the annual *Empowering God's Children,* safe environment lesson. Grade specific lesson plans are available for parent/guardian viewing as requested.

_____ **YES,** I give permission for my child/children to participate in the annual Empowering God's Children lesson.

Parent/Guardian:
Printed Name _____Signature _____Date _____

_____ **NO,** I do not give my permission for my child/children to participate in the annual Empowering God's Children lesson.

Parent/Guardian:
Printed Name _____Signature _____Date _____

Media Consent

St. John the Evangelist Catholic Church uses correspondence and social media with parishioners and the community, in the form of, a parish bulletin, parish website, flyers, Facebook, etc. Parents/Guardians are given the option to allow the use of their children's photo/video, or class work, without names, for these purposes.

_____**YES**, I give media consent.

Parent/Guardian:
Printed Name _____Signature _____Date _____

_____**NO,** I do not give media consent.

Parent/Guardian:
Printed Name _____Signature _____Date _____