



## HOLY FAMILY CATHOLIC CHURCH

311 N. Woodland Avenue ♦ Oglesby, Illinois 61348

Rectory: (815) 883-8233 ♦ Fax: (815) 883-8771

Dear Parents,

Passing on the faith and life of Jesus Christ is the most important gift and duty we owe our children. Holy Family Parish and School is happy and honored to partner with you in this formation.

Our Confraternity of Christian Doctrine program (CCD) is lead by the parish school and our full time Holy Family teachers. They are licensed for the classroom and trained in Catholic School curriculum.

Our program will run on Wednesdays from 4 until 5pm, beginning September 21st. A full class schedule is attached. This is a consolidated schedule, so we ask that children only miss classes due to exceptional circumstances. We can provide religious instruction letters to any extracurricular coach or leaders who require them.

A registration form is attached. If possible, we ask that the \$150 per family fee be returned with the registration form by September 5th. The fee covers only a fraction of the total costs; the program is still heavily subsidized by the parish and school. We will, however, find scholarships for any family that needs assistance. We are here to help!

Prayers for you and your families as we begin this new school year,

Fr. Paul Carlson



# Holy Family CCD Registration



Welcome! Please complete the following and return, with the waiver sheet and fees, to the Parish Office. God Bless You!

/	/
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Registration Date

## Family Information

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Father's Name

( )
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Father's Cell

--

Father's Email

--

Home Street Address

--

Emergency Adult Contact

( )
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Best Family Phone for Text Announcements

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Mother's Name

( )
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Mother's Cell

--

Mother's Email

--

City, State

Zip Code

( )
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Emergency Contact's Cell

--

Emergency Contact Relationship (eg: Grandparent, Aunt, etc.)

## Student Information (1st)

--

Student First Name

--

Last Name

--

Middle Name

--

Suffix

--

Goes By (Nickname)

/	/
---	---

Date of Birth

--

City of Birth

--

Grade Entering

M	F
---	---

Gender

/	/
---	---

Date of Baptism

--

Church

--

City and State

/	/
---	---

Date of First Communion

--

Church

--

City and State

## Student Information (2nd)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Student First Name	Last Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Goes By (Nickname)	Date of Birth	City of Birth	Grade Entering
<input type="text"/>	<input type="text"/>	<input type="text"/>	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Baptism	Church	City and State	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of First Communion	Church	City and State	

## Student Information (3rd)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Student First Name	Last Name	Middle Name	Suffix
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Goes By (Nickname)	Date of Birth	City of Birth	Grade Entering
<input type="text"/>	<input type="text"/>	<input type="text"/>	Gender
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Baptism	Church	City and State	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Date of First Communion	Church	City and State	

We ask this registration, waiver sheet, and fees be returned to the Parish Office by **September 5th, 2022.**

**The first day of class is Wednesday, September 21st.**

Fees for this year are \$150 per family. Scholarships are available in case of need.

Contact us with any questions!

**Fr. Paul Carlson, Pastor**  
**Mrs. Jennifer Newman, Secretary**

**311 N. Woodland Ave - Office**  
**336 Alice Ave - School**  
**Oglesby, IL 61348**

**Ph (815) 883 - 8233**  
**Fx (815) 883 - 8771**

**[office@hfoglesby.org](mailto:office@hfoglesby.org)**

## Holy Family Religious Education Schedule 2022 – 2023

### Semester 1

9/21/2022	Class 1
9/28/2022	Class 2
10/5/2022	Class 3
10/12/2022	Class 4
10/19/2022	Class 5
10/26/2022	Class 6
11/2/2022	Class 7
11/9/2022	Class 8
11/16/2022	Class 9
11/23/2022	Thanksgiving Break
11/30/2022	Class 10
12/7/2022	OPS Holiday Program
12/14/2022	Class 11
12/21/2022	Christmas Break
12/28/2022	Christmas Break

### Semester 2

1/4/2023	Class 12
1/11/2023	Class 13
1/18/2023	Class 14
1/25/2023	Class 15
2/1/2023	Class 16
2/8/2023	Class 17
2/15/2023	Class 18
2/22/2023	Mass – Ash Wednesday
3/1/2023	Class 19
3/8/2023	Class 20
3/15/2023	Class 21
3/22/2023	Class 22
3/29/2023	Class 23
4/5/2023	Spring Break
4/12/2023	Easter Break
4/19/2023	Class 24
4/26/2023	Class 25
5/3/2023	Class 26
5/10/2023	Class 27

Classes begin promptly at Holy Family School at 4pm. First Communion is scheduled for Sunday, May 7<sup>th</sup> at 1pm. Our Confirmation is tentatively scheduled for next fall, October 2023, for students then in 8<sup>th</sup> grade. Please contact the parish office ([office@hfoglesby.org](mailto:office@hfoglesby.org)) with any questions or to report an upcoming absence.

# CCD Program Medical and Liability Waivers

## **AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT**

I understand that in case of illness or injury to my child, the parish will try to notify me or the person I have listed as an emergency contact. In case of said emergency, at a time when I or my emergency contact cannot be notified, I grant full power to the parish and school to 1) arrange transportation to a proper facility where medical treatment would be administered, and 2) sign releases as may be required in order to obtain treatment as is required in judgment of medical authorities at the facility. This Authorization for Emergency Medical Treatment is valid for one year from August 1, 2022 through July 31, 2023. This information will be kept in parish files.

\_\_\_\_\_  
Print Name of Parent/Guardian

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

\_\_\_\_\_  
Date

## **LIABILITY WAIVER**

As a parent and/or guardian, I remain legally responsible for any personal actions taken by the above named student. I understand the risks this activity may present to my child, including, but not limited to, a serious personal injury or death. In consideration of my child being allowed to participate in this activity, I hereby release and agree to indemnify and hold harmless the Diocese of Peoria, the parishes, teachers, chaperones, volunteers, or representative associated with the event and their employees and agents from any liability for injuries, damages, medical expenses, or any other loss to my child family, or me (including attorney's fees) arising from or related to my child's participation in this activity.

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

\_\_\_\_\_  
Date

## **PUBLICITY WAIVER**

On occasion, the parishes and school named above take photographs or make an audio or video recording of children and/or adults involved in parish activities. Such photographs or video records may be used by staff and participants to remember the activities or participants. In addition, such photographs and audio-visual records may be used in parish and school publications or advertising materials to let others know about the parish. Also, local news organizations may learn about the parish's activities or events, and the parishes may invite or allow when to photograph or record such events to be used, distributed, or displayed as the agents of the parishes and school see fit.

I hereby expressly grant to the parishes and school named above and/or the Diocese of Peoria and Parishes the right, privilege and license to use the picture or likeness of my child/children in any photograph, movie, video production and to use the verbal or written statements or declarations of my child/children for the purpose of publicizing fostering and promoting the parish and its programs, or any other purpose in furtherance of the mission of the parish and/or the Diocese of Peoria.

\_\_\_\_\_  
Name(s) of Student(s)

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

\_\_\_\_\_  
Date