

Religious Education Family Registration  
**Christ the King Roman Catholic Church**  
**5006 E. Wonder Lake Road**  
**Wonder Lake, IL 60097**  
**R.E. Office 815-653-2581 Date: \_\_\_/\_\_\_/07**  
**Religious Education Classes 2007 -2008**

Family Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
P.O. Box: \_\_\_\_\_  
City: \_\_\_\_\_ Zip: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Unlisted? Yes \_\_\_ No \_\_\_  
Address mail to (choose one): Mr/Mrs Dr/Mrs Mr Mrs Ms Miss Other \_\_\_\_\_  
Registered Parishioner of Christ the King Parish No \_\_\_ Yes \_\_\_ If yes, Envelope# \_\_\_\_\_

**PARENTS / GUARDIANS**

**\*Please complete ALL information for ALL parents / guardians**

Relationship to Child(ren): _____	Relationship to Child(ren): _____
Name: _____	Name: _____
Business: _____	Business: _____
Business Phone: _____	Business Phone: _____
Cell Phone: _____	Cell Phone: _____
Email Address: _____	Email Address: _____
Marital Status: _____	Marital Status: _____

**PHYSICIAN / INSURANCE INFORMATION**

Name of Children's Physician: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name of Health Insurance Co: \_\_\_\_\_  
Policy in the name of: \_\_\_\_\_

In case of medical emergency, I understand that every effort will be made to contact the parent/guardian of \_\_\_\_\_ (list all children in the program). In the event that I cannot be reached I hereby give permission to the physician selected by the adult staff of the Christ the King Parish Religious Education Program to secure proper medical treatment deemed necessary for my child. I understand that I will be promptly notified in the event of any serious accident or illness and prior to any major surgery, except when delay in such communication would endanger life.

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

**EMERGENCY CONTACT PERSON INFORMATION**

In the event of an emergency and if you are unable to reach me, please contact:  
Name: \_\_\_\_\_  
Relationship to Child: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

Fax this form back to: 815-653-9401 attn: Coordinator of Religious Education  
or mail to: Coordinator of Religious Education,  
Christ the King Church, 5006 E. Wonder Lake Rd.  
Wonder Lake, IL 60097