

**Parish Directors, Coordinators, and Administrators  
of Religious Education (PDCARE) MEMBERSHIP FORM  
2018-2019**

**MEMBERSHIP**

**Fee: \$35.00**

Please complete the form in its entirety.

Print clearly. Return this form and payment together to the attention of:

Wanda Nouel, Office for Catechetical Formation, 222 North 17<sup>th</sup> Street, Philadelphia, PA 19103

**Checks should be made out to PD/CARE Association.**

~~~~~  
Last: \_\_\_\_\_ First: \_\_\_\_\_ MI: \_\_\_\_\_

Name of Parish of Service: \_\_\_\_\_ County: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Office: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Cell (optional) \_\_\_\_\_ Home (optional): \_\_\_\_\_  
~~~~~

**Program Details (i.e. K-6, 7 & 8, HS)**

Grade levels offered: \_\_\_\_\_ Total # of students: \_\_\_\_\_

Total number of "Home Schooling" Students \_\_\_\_\_ Grade level for Confirmation: \_\_\_\_\_

Weekly Schedule (Days and Times): \_\_\_\_\_

Special programming: [check appropriate box (es)]

- Summer Program
- Summer Component with additional (4-5) sessions during the academic year
- Monthly
- Bi-Weekly

Other \_\_\_\_\_

Total # of children with disabilities \_\_\_\_\_

Total # of children with disabilities accommodated within typical classrooms \_\_\_\_\_

Total # of children with disabilities served in special classes/program \_\_\_\_\_

\* As defined by Individuals with Disabilities Education Act (IDEA), the term "child with a disability" means a child: with intellectual disability, hearing impairments (including deafness), speech or language impairments, visual impairments (including blindness), serious emotional disturbance, orthopedic impairments, autism, traumatic brain injury, other health impairments, or specific learning disabilities; and who, by reason thereof, needs special education and related services.