

**ST. JOSEPH'S CHURCH FAITH FORMATION
FIRST-TIME REGISTRATION 2010-2011**

Today's Date: _____ Please be sure to complete the form thoroughly and to Print Clearly.

PARENT/GUARDIAN INFORMATION PAGE

	<u>MOTHER/Legal Guardian</u>	<u>FATHER/Legal Guardian</u>
First Name		
Last Name		
Address	Address: _____ Apt.#: _____ City: _____ State: _____ Zip: _____	Address: _____ Apt.#: _____ City: _____ State: _____ Zip: _____
Home Phone	(____) ____-_____	(____) ____-_____
Cell Phone	(____) ____-_____	(____) ____-_____
Work Phone	(____) ____-_____	(____) ____-_____
E-mail	_____ <i>(Please note this will be used for reminders and important communication.)</i>	_____ <i>(It will not be distributed to any organizations, etc.)</i>
Occupation		
Religion		

IMPORTANT - BEFORE YOU CONTINUE, FROM THE ABOVE INFORMATION CHOOSE THE FOLLOWING:

- 1) Circle the primary mailing address of the child.
- 2) Circle the primary phone number to call in order to reach a parent in a timely manner.

EMERGENCY CONTACT ~ If parent is not available contact:

Name: _____ Relationship to Child: _____

Phone number: (____) ____-_____

OPPORTUNITIES for you and your family

- ⇒ If one of you is not Catholic, would you be interested in learning more about Roman Catholicism (RCIA)? Yes No
- ⇒ If you have not received the sacraments of Confirmation and Eucharist would you be interested in getting information about preparing to receive these sacraments? Yes No

Marriage: If you were not married in a Catholic Church, but are interested in getting more information about how to con-validate your marriage please contact our parish priests. They would be happy to answer questions regarding marriage in the church, annulments, etc.

CHILD'S INFORMATION PAGE *(Please Print Clearly)*

You must provide a copy of a Baptismal Certificate if the child was not baptized at St. Joseph's.

	Child 1	Child 2	Child 3
First Name			
Last Name			
Date of Birth			
Sex	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> Male <input type="checkbox"/> Female
School Attending			
Town (of School)			
Grade in <u>Sept. '10.</u>			
Sacraments Received: (Please check if received and complete information.)			
<input type="checkbox"/> *Baptism	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____
<input type="checkbox"/> First Communion	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____
Note here if your child has had any <u>prior Religious Education:</u>	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____	Church: _____ Town: _____ Date: _____

PARENT ACKNOWLEDGEMENT OF RESPONSIBILITIES

ALLERGIES, SPECIAL NEEDS, LEARNING DISABILITIES, ETC.

Please be let us know if this child has any special learning needs (e.g. reading, attention deficits, learning, etc.) This information will be kept confidential and will be disclosed only to the catechist in order to better serve your child in the classroom.

Do any of your children have any special learning needs or disabilities? Yes No

Name of child: _____

Please explain: _____

Please note any allergies: Child's Name _____ Allergies: _____
 Child's Name _____ Allergies: _____

Please Initial and/or sign the following:

_____ I give permission for my child to be photographed. _____ I do not want my child photographed.

_____ I give permission for a minor to pick up my child.

Print Minor's name _____ Relationship to your child _____

_____ I will try my best to support my child's faith journey by fulfilling my responsibilities as stated in the parent handbook.

_____ I have the 2010-11 Edition of the Parent Handbook.

Signature: _____

Date: _____

REGISTRATION OPTIONS AND FEES FOR ONGOING FAITH FORMATION

Please select one program. See parent handbook for program descriptions and requirements.

Payment in full OR a deposit of at least \$25.00 is required at the time of re-registration. The balance must be paid in full by September 1, 2010. Checks payable to St. Joseph Church REC



WEEKLY FAITH FORMATION SESSIONS

Grades 1 – 2 Mondays, 3:50pm to 5pm, **Grades 3 – 5** Tuesdays, 3:50pm to 5pm
Grades 6 – 8 Tuesdays, 7:00pm to 8:15pm

Fee Information: One Child - \$95.00, Two Children - \$150.00, Three Children - \$175.00



MONTHLY SUNDAY FAMILY CATECHETICAL PROGRAM (8:15am-9:45am) (Grades K-8)

Fee Information: One Child - \$125.00, Two Children - \$175.00, Three Children - \$200.00



SPECIAL NEEDS PROGRAM (For children with special needs that prevent them from attending regular religious education sessions.) See Fee Information for Family Program above. Please HELP US SPREAD THE WORD about this program if you know families who have children with special needs or disabilities.



HIGH SCHOOL SACRAMENT PREPARATION for teens enrolling in our program for the first time preparing to receive the sacraments. *Fee Information:* One Child \$ 50.00 and an additional \$25.00 per child



For Home Schooling option please contact the Faith Formation Office.

SACRAMENT PREPARATION – IMPORTANT NOTE

There are separate, additional programs and fees for sacrament preparation. Please see the parent handbook for details. Payment is due at the First Parent Meeting in September the year the child will prepare for sacraments.
Eucharist(Communion): \$80.00 Confirmation: \$110.00

You have 72 hours to withdraw this registration and receive a full refund.

Payment Information: For office only

Payment in FULL rec'd Date: _____ Amount: _____ Cash Check Number _____
 DEPOSIT of amount: _____ rec'd Date: _____ Cash Check Number _____

Notes _____