

1. Turn in completed form and fees on July 1st to the Rectory!

2. Early Bird Savings
July 1-July 1s

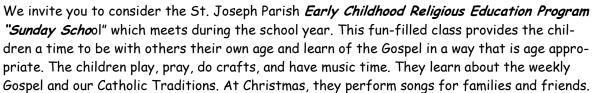
3. Late charge after September 8

4. Classes begin in September

We have something for children of all AGES!!!!

All are welcome to join our growing family!!!!

Early Childhood - 3 year - 5 year olds - Sundays 9-10am



At Easter, they have an Easter Celebration. Our dedicated teachers have worked hard to make "Sunday School" a fun place to be! Please join us!

Do you want your child to receive 1st Holy Communion?

Preparation for First Reconciliation and First Eucharist (Communion) is a two-year process. Generally children begin in Grade 1 and receive their Sacraments in Grade 2. Classes for the children are weekly during the school year on Sundays from 10:30-11:45am. Several special workshops for parents are held during both years and special retreats for parents and children are held during both years to help in the preparation.



<u>Older Children (above Grade 2) are welcome to begin</u> or continue in the Sacrament Preparation Program at any grade level. Families will be directly involved in all Sacramental Programs.

<u>Baptism for Children Grade 1 and above</u> is called the Rite of Christian Initiation. This process is family-centered. Children are expected to attend Religious Education classes according to their grade

level. Parents will be included in sessions for the family—dates to be scheduled after interview with family.



FIRST CHOLY COMMUNION

Preparation

Catholic Joing com

GRADES 3-5 Our faith formation isn't over just because we receive 1st Reconciliation and 1st Communion! We encourage all children to continue their faith education throughout their elementary and middle school years. We have a wonderful program for all ages. We are using the St. Mary's Press Catholic Children's Bible for 1st—Sth grades. Classes for 3rd through Sth Grades are



held on Sunday Mornings from 10:30-11:45 a.m.



Our **Middle School Program helps** our young teens learn about their Catholic Faith by putting it into ACTION! They learn through reading the catechism and Holy Scriptures and then follow-up by doing hands on service projects, prayer services and have community fun! Every middle school student receives a St. Mary's Press Catholic Youth Bible and is encouraged to read it daily! Middle school is the beginning of Youth Ministry at St. Joseph. The classes are held on Tuesday evenings from 7-8pm. They are



invited to monthly Youth Activities for all Middle School students, they can invite their friends!



Registration - Family Packet 2014-2015

There are three ways to register your child(ren) for Religious Education: Early Childhood, Elementary and Middle School Programs:

- 1. Pick up this packet from the exits of the Church, from the Rectory, or from the Parish Activity Center (PAC-Religious Education Office) complete it by hand.
- 2. Download this packet from the St. Joseph Website (http://www.stjosephlb.org/religious-education/family-friendly-registration-form-for-religious-education/ or from an email or newsletter then complete it by hand
- 3. Fill this out on-line. The following page explains how to compete the form on-line.

In all cases, after you complete the form you will

- Print it out (if necessary) Sign all the necessary pages -
- Turn the packet, the full registration fee and a copy of your child(ren)'s Baptismal Certificate
- To the Rectory beginning July 1st, 2014.

The forms in this registration packet are interactive - you can click on the yellow colored fields and type directly on the forms. To use this interactive feature, you must open the program in Adobe Acrobat Reader. This program can be downloaded for free via the Internet. Macintosh users please note that the built in PDF reader "Preview" will not allow you to type on the forms - you must open the file with Adobe Acrobat Reader.

Additional instructions are on the following pages.

Important Registration Dates:

- First date to submit packets and payments: July 1, 2014
- Early bird Fee timeframe: July 1-July 15, 2014 (Save \$10 per child)
- Please submit packets and fees by September 1, 2014 to avoid \$25 late fee.

Directions for Completing the Packet On-Line:

If you are viewing this on your computer, you have successfully downloaded and opened the file.

If you are viewing this on a Macintosh, please make sure you are viewing it in Adobe Acrobat Reader and not the built in "Preview" program. The Preview program will not allow you to type directly on the forms. If necessary, close the program, launch Adobe Acrobat Reader and then go to the File menu and open the document through Adobe Acrobat Reader.

Navigating/ Moving through the pages:

To save time, you can use the TAB key to move from one field to the next. Fields that you can type in are designated as blue boxes.

To jump to specific pages in the Table of Contents, move your cursor to that item and click on it.

Viewing pages easier:

You can **zoom** pages to view easier if necessary by using the + or - options next to the 100% on the tool bar.

Entering Information:

Any fields that are duplicated throughout the forms only need to be entered once. For example, once you type in your child's name, it will automatically fill in every other occurrence throughout the packet automatically and save you time. Any information in a field can be changed by highlighting the text in that field and typing it again.

Printing:

You can either print the entire document and fill it out by hand or complete the document on-line and then print it out. Submit it with your payment and Baptismal Certificate (if required) beginning July 1, 2014.

Returning the forms:

After you have printed the required forms, please make sure you have signed them and turned them in:

Important Registration Dates:

First date to submit packets and payments: July 1, 2014

Early Bird Fee Timeframe: July 1 – July 15, 2014 (Save \$10 per child)

Please submit packets by September 1, 2014 to avoid \$25 late fee.



St. Joseph Registration Check Off List 2014-2015

Please return the following documents to St. Joseph Rectory beginning JULY 1, 2014.

All forms will need to be completed in full, dated, signed and returned with your full payment and copy of Baptismal Certificate if required in order to facilitate your 2014-2015 registration,

Registration forms For Parent and Child(ren) Information -includes Early Childhood through 8th grade - Return

Parent Volunteer Form - Return

Virtus "Teaching Touching Safety" Children's Program . Archdiocese of Los Angeles "Permission Form- Return

Sign-In and Out Letter Permission Form - Return

Media/Photo Authorization - Return

Student Behavior Guidelines - Return

Fees Page with Worksheet- Return with full payment

Parish Registration Form - Return if you want to register at St. Joseph Parish

Once your registration form has been received and been accepted, you will receive via email:

* Important Orientation Dates for Religious Education – Welcome Letter

General Consent Form-Return

- * Preparation for 1st Communion Calendar (If you are in the 1st Communion Preparation Program)
- * Religious Education Parent Handbook (Receipt of these will need to be signed and returned via email or dropped off to the Religious Education Office).



Parent Signature

St. Joseph Religious Education Family Registration Form

6180 East Willow Street - Long Beach, CA 90815 (562)598-0519 Religioused@stjosephlb.org

| Γ, | AMTLA | RASIC INFORM | VAIT | ON |
|---------------------------------------|-------------|------------------------|----------|-----------------------------------|
| Family Last Name: | | | | |
| Street Address: | | | | |
| City: | Zip: | | Home 1 | Phone: |
| Family Email: | | | | |
| Our main form of com | municatio | n is through email, pl | lease in | form us of any changes. |
| P | arent/0 | Guardian Infor | mati | on |
| Mother's First Name: | | Mother's Maiden | Name | /Last Name: |
| Mother's Cell Phone: | | Mother's Religion | ı: | |
| Mother's email: | | · | Mot | her's Marital Status: |
| | | _ | | |
| Father's First Name: | | Father's Last na | me: | |
| Father's Cell Phone: | | Father's Religion | | |
| Father's Email: | | | Fath | ner's Marital Status: |
| | | | | |
| | Emer | gency Informa | tion | |
| In the event of an emergency | , if parent | s cannot be reached, | please | contact the following persons: |
| Local Emergency Contact Name: | | | | |
| Local EC Relationship: | | Local EC Phone: | | |
| Out of State Emergency Name: | | | | |
| Out of State EC Relationship: | | Out of State Ed | C Phone | 2: |
| Adults to whom the child may be | e released | ! : | | |
| Adults to whom the child may N | OT be re | leased: | | |
| | | | | |
| | WEDI | CAL INFORMAT | ΓΙΟΝ | |
| Health Ins. Carrier Name: | Group 1 | Number: | | Subscriber Number: |
| | | | | |
| Dr. Name: | | Dr. Phone | | |
| Consent for Medical Treatment: | I under | stand that the St. | Joseph | Office of Religious Education |
| does not assume responsibilit | y for pay | ment of physicians. | Howe | ever, in an emergency, the office |
| may choose a physician. In | an emerge | ency, I give the off | ice per | rsonnel permission to have my |
| child receive medical treatme | ent | | | |
| | | | | |
| | | | | |
| | | | | |

Date



Child(ren) Registration Sheet

| Religious Education | | | | | |
|---|--|--|--|---|--|
| Child#1 First Name: | | Child Las | t Name: | | M/F: |
| Birthdate: | Sch | nool: | | Grade | in Fall: |
| New Student: | Returning Studer | nt: | Needs Baptism: | Needs 1st | Communion: |
| Allergies/Special Need | ds: | | | | |
| Anything Special teac | her should know: | | | | |
| Is Your child's immuni No | zations current? Yes | If not | , please provide explanat | ion: | |
| I would like to Regis | ster this child fo | <u>or</u> | | | |
| Farly Childhoo | od Program - Sur | ndav Mori | nings from 9am-10am: | | |
| 3 Year (| _ | ır Old | 5 Year Old | | |
| · / 34.1 | ,,, | | 0 / Gai. G.G | | |
| Elementary Pr | oaram – Sunday | Morninas | from 10:30-11:45am: | | |
| • | • | _ | st Communion and 1st 1 | | ion |
| · · · · · · · · · · · · · · · · · · · | am beginning with | | | | om Last year |
| | 3 3 | | | • | • |
| My child | d is continuing in | Faith Fo | rmation and will be req | istering fo | r grade: |
| 3 | 4 | 5 | _ | | |
| | | | | | |
| My child is re | gistering for Mic | ddle Scho | ool Program – Tuesday I | <u>Evenings fr</u> | om 7-8pm: |
| 6 | 7 | 8 | | | |
| | | | | | |
| Child#2 First Name: | | Child Las | t Name: | | M/F: |
| Child#2 First Name: Birthdate: | Sch | Child Las | t Name: | Grade | M/F: in Fall: |
| *** | Sch Returning Studer | nool: | t Name: Needs Baptism: | | |
| Birthdate: | Returning Studer | nool: | | | in Fall: |
| Birthdate: New Student: | Returning Studer ds: | nool: | | | in Fall: |
| Birthdate: New Student: Allergies/Special Need | Returning Studer ds: her should know: | nool: nt: | | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni | Returning Studer ds: her should know: zations current? Yes | If not | Needs Baptism: | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No | Returning Studer ds: her should know: zations current? Yes | If not | Needs Baptism: | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis | Returning Studer ds: her should know: zations current? Yes ster this child fo | If not | Needs Baptism: , please provide explanat | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis | Returning Studer ds: her should know: zations current? Yes ster this child fo | If not | Needs Baptism: | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special New Anything Special teac Is Your child's immuni No I would like to Regis Early Childhoo | Returning Studer ds: her should know: zations current? Yes ster this child fo | If not | Needs Baptism: , please provide explanat nings from 9am-10am: | Needs 1st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhood 3 Year C | Returning Studer ds: her should know: zations current? Yes ster this child food Program - Sur Old 4 Yea | If not | Needs Baptism: , please provide explanat nings from 9am-10am: | Needs 1 st | in Fall: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhood 3 Year Childhood 3 Year Childhood | Returning Studer ds: her should know: zations current? Yes ster this child food Program - Sur Old 4 Yea rogram - Sunday | If not or day More ar Old Mornings | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: | Needs 1st | in Fall: Communion: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhoo 3 Year C Elementary Pr My Child | Returning Studer ds: her should know: zations current? Yes ster this child food Program - Sur Old 4 Yea rogram - Sunday | If not If not ar Old Mornings are for 1 | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: st Communion and 1st f | Needs 1 st ion: Reconciliati | in Fall: Communion: |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhoo 3 Year C Elementary Pr My Child I | Returning Studer ds: her should know: zations current? Yes ster this child for od Program - Sur Old 4 Yea rogram - Sunday d Needs to prep am beginning with | If not If not or Mornings are for 1 the 1st y | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: st Communion and 1st fear I am co | Needs 1st | in Fall: Communion: ion om Last year |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhoo 3 Year C Elementary Pr My Child I | Returning Studer ds: her should know: zations current? Yes ster this child for od Program - Sur Old 4 Yea rogram - Sunday d Needs to prep am beginning with | If not If not or Mornings are for 1 the 1st y | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: st Communion and 1st f | Needs 1st | in Fall: Communion: ion om Last year |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhoo 3 Year C Elementary Pr My Child I | Returning Studer ds: her should know: zations current? Yes ster this child for od Program - Sur Old 4 Yea rogram - Sunday d Needs to prep am beginning with d is continuing in | If not If not If not Or In Old Mornings Or 1 In the 1st y Faith Fo | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: st Communion and 1st fear I am co | Needs 1st | in Fall: Communion: ion om Last year |
| Birthdate: New Student: Allergies/Special Need Anything Special teac Is Your child's immuni No I would like to Regis Early Childhood 3 Year C Elementary Pr My Child I My child 3 | Returning Studer ds: her should know: zations current? Yes ster this child for od Program - Sur Old 4 Yea rogram - Sunday d Needs to prep am beginning with d is continuing in | If not If not or Iday Morn or Old Mornings ore for 1 or the 1st y Faith For 5 | Needs Baptism: , please provide explanat nings from 9am-10am: 5 Year Old from 10:30-11:45am: st Communion and 1st fear I am co | Needs 1st ion: Reconciliationtinuing from | in Fall: Communion: on om Last year or grade: |



| Child#3 First Name: | | Child | Last Name: | | M/F: |
|------------------------|-----------------|---------|-------------------------|------------|--------------------------------|
| Birthdate: | | School: | | | Grade in Fall: |
| New Student: | Returning Stu | ident: | Needs Baptism: | Ne | eds 1 st Communion: |
| Allergies/Special Nee | ds: | | | | |
| Anything Special teac | her should kno | w: | | | |
| Is Your child's immuni | zations current | t? If | not, please provide exp | olanation: | |
| No | Yes | | | | |

Early Childhood Program - Sunday Mornings from 9am-10am:

3 Year Old

4 Year Old

5 Year Old

Elementary Program - Sunday Mornings from 10:30-11:45am:

My Child Needs to prepare for 1st Communion and 1st Reconciliation

I am beginning with the 1st Year

I am continuing from Last year

My child is continuing in Faith Formation and will be registering for grade:

3

My child is registering for Middle School Program - Tuesday Evenings from 7-8pm:

5

6 7

| Child#4 First Name: | | Child Las | t Name: | | | M/F: |
|---|---|-----------|---------------------|------------|----------------|------|
| Birthdate: Schoo | | School: | ool: | | Grade in Fall: | |
| New Student: | Returning Student: Needs Baptism: Needs | | eds 1 st | Communion: | | |
| Allergies/Special Nee | ds: | | | | | |
| Anything Special teacher should know: | | | | | | |
| Is Your child's immunizations current? If not, please provide exp | | | nation: | | | |
| No | Yes | | | | | |

I would like to Register this child for

<u>Early Childhood Program - Sunday Mornings from 9am-10am</u>:

3 Year Old

4 Year Old

5 Year Old

Elementary Program - Sunday Mornings from 10:30-11:45am:

My Child Needs to prepare for 1st Communion and 1st Reconciliation

I am beginning with the 1st Year

I am continuing from Last year

My child is continuing in Faith Formation and will be registering for grade:

3

4

5

My child is registering for Middle School Program - Tuesday Evenings from 7-8pm:

6

7

8



Parent Volunteer Form

To have any successful Religious Education Program, parent involvement is essential.

In registering your child you are at the same time committing yourself to his/her faith formation.

All parents are expected to participate in this program to the best of your ability.

We ask that you volunteer at least <u>three times during the year</u>, one of those being the Parish Fair.

| Family Last Name: | Home Phone: |
|-------------------|-------------|
| Family Email: | |

I would like to volunteer for: (Please check all that apply)

Full or Part Time Opportunities that provide Tuition Savings:

Catechist/Team Teacher Classroom aide

Substitute Catechist

<u>As Catechist/Team Teacher teaching weekly</u> - You get Full discount for one registration fee (\$80)-plus $\frac{1}{2}$ off all other children in Early childhood/Elementary Program

<u>As Adult Classroom Aide helping weekly</u> - You get 1/2 off one child registration fee (being mentored into Catechist position.)

As Teen Classroom Aide helping weekly—You get service hours

As substitute catechist - You get \$20 off one child (as long as you serve between 1-4 classes).

If you end up substituting more Sundays, we will negotiate the fee.

Other Volunteer Opportunities (No Tuition Savings, but a lot of appreciation for your generosity!

Hospitality Ministry - Set Up Coffee/Donuts For Various Sundays

Set-up for various events in the Hall during the year. Come early to help set up tables and sometimes set up hospitality. (Usually between 8-8:30 - so that we are done in time for 9 am Mass)

Assist with Middle School various events—Please come 30 minutes early and stay until everything is clean (approx. 30 minutes!! - maybe less, with many hands!!)

Parish Fair: We are asking every family to serve in Sweet Booth for a 3 hour shift

Vacation Bible Camp - Usually 1st week of July (after 4th) - As a catechist, decorations, crafts, so many ways to share your gifts in this fun Ministry! 1 week (9-12 pm the first week of July (after July 4th)

Volunteer Coordinator (make calls to people who have volunteered to remind them of activity)

Other Gifts I have that I would like to share:



Virtus "Teaching Touching Safety" Children's Program Archdiocese of Los Angeles "Permission Form"

TO: Parents

FROM: St. Joseph Religious Education

SUBJECT: Opportunity to allow your child to participate in the Child Abuse Prevention Program

DATE: September 2014

St. Joseph Religious Education Program will present a sexual abuse prevention session to our students. This program is provided to us by the Los Angeles Archdiocese, and is a part of our ongoing effort to help create and maintain a safe environment for children and to protect all children from sexual abuse.

As a parent, you have the right to choose whether your student participates. If you have questions about the program or the lesson, please contact Nancy Longo at (562)598-0519.

Please indicate below whether you wish your child to participate in this program.

Dates scheduled for this program will be announced at orientation.

For more information visit the VIRTUS *Online*™ website at <u>www.virtus.org</u>.

Permission for participating in the Touching Safety program:

| Child 1 First Name | l am | allowing my child to participate in the Protecting God's Children Child Abuse Prevention Program |
|--------------------|----------|--|
| | I am NOT | Official Office Albuse 1 Tovertion 1 Togram |
| Child 2 First Name | l am | allowing my child to participate in the Protecting God's Children Child Abuse Prevention Program |
| | I am NOT | Ormatori Orma / 15460 F Tovorkiori F Togram |
| Child 3 First Name | l am | allowing my child to participate in the Protecting God's Children Child Abuse Prevention Program |
| | I am NOT | ormanon orma ribado i roventien i rogiam |
| Child 4 First Name | l am | allowing my child to participate in the Protecting God's Children Child Abuse Prevention Program |
| | I am NOT | ormanon orma ribado i roventien i rogiam |

| Family Last Name | |
|----------------------|--|
| Parent's Signature:_ | |
| Date: | |



Sign-In and Sign-Out Permission Slip

We are again asking that parents use a sign-in/out sheet for dropping off and picking up your children. The inner parking lot is very busy at times and we are not comfortable with children being dropped off by themselves or leaving our care to meet another sibling or parent.

We are concerned for the safety of your children and feel fortunate that there has not already been an accident. Please consider this when making arrangements for your child/children to attend and leave classes. Please complete this form for our records

For the 4^{th} - 8^{th} graders, this may not be a problem. However, for liability and safety reasons, we are asking that you use this system or sign the bottom of this letter indicating that you will make other arrangements.

Thank you for your consideration and cooperation in this matter.

Sincerely in Christ Nancy Longo Director Religious Education

Family Last Name:

| | I will use the sign-in/out sheet each week for this child | I have designated the following Person or persons to drop off and/or pick up my child/children. List names in box for all children. | My child has my permission to be dropped off and to leave class without a designated person. (only for 5 th , 6 th , 7 th , 8 th grades) |
|--------------------|---|---|--|
| Child 1 First Name | Yes | | Yes |
| | No | | No |
| Child 2 First Name | Yes | | Yes |
| | No | | No |
| Child 3 First Name | Yes | | Yes |
| | No | | No |
| Child 4 First Name | Yes | | Yes |
| | No | | No |

Other Special Instructions:

| Parent Signature | Date |
|------------------|------|



St. Joseph Church Religious Education Programs Media Photo Release Form

Our Religious Education Catechists will be following our students throughout their years in the Religious Education Programs, i.e. Early Childhood Education Program, Elementary Education Program, Middle School Program and RCIA adapted for Children, they may document on film their time spent in classes and activities such as Workshops, Celebrations, Advent, Christmas, Open House, Stations of the Cross, Easter, First Reconciliation, First Holy Communion and May Crowning among others. The photos will be used primarily for the Parish Directory, Parent Projects and Open House Boards and will not be published on the World Wide Web.

I, hereby, authorize the making of photographs of the stated events and my participation therein, and the publication or use thereof. I, hereby, waive any right to compensation therefore or any right that I otherwise might have to limit or control such making or use.

I also understand that these items will be used solely for memorializing the event and nothing else.

| Signature of Parent or Legal Guardian | Date |
|---------------------------------------|------|
| | |
| Child#4 First Name: | |
| Child#3 First Name: | |
| Child#2 First Name: | |
| Child#1 First Name: | |
| Family Last Name: | |



ST. JOSEPH RELIGIOUS EDUCATION STUDENT BEHAVIOR GUIDELINES

The following guidelines have been established to ensure a positive learning environment for students, Catechists, and Aides:

- Students will agree to cooperate as follows:
 - Be respectful of the Catechists, Aides, and fellow classmates.
 - Listen attentively and participate in the lesson.
 - o Follow instructions and show a positive attitude in cooperating with Catechists, Aides and classmates.
- 2. Behavior not acceptable:
 - Being rude to Catechists or another person.
 - Speaking out of turn or interrupting a catechist.
 - o Misusing another's personal property or items in the room not to be touched.
 - Walking or standing around classroom when it is time to be seated.
- 3. Procedure when unacceptable behavior is identified:
 - o Student will be asked by Catechist to stop the unacceptable behavior (First incidence).
 - o If student continues behavior, he/she will be asked again to stop behavior and name will go on board.
 - o If behavior continues, the Catechist will not say anything to the student, but will place a check by name (this will be the final warning).
 - o If student still continues to be uncooperative, the student will be taken by another adult to the Director's office.
- 4. Procedure for notifying parent of unacceptable behavior:
 - o Director will speak to student to gather information regarding incident from student's perspective.
 - Director will speak with the Catechist to ascertain what has occurred from his/her perspective.
 - o A decision will be made as to whether or not the student may return to class or must stay in the office until class is over
 - e

| | 0 | If the student must stay in the office, the parent will be asked to pick up their child at the Director's office for further discussion. Should the behavior continue on a regular basis, the parents and Director will discuss what further action should be taken |
|---------------|-----|--|
| Family Last | nai | ne: |
| Child 1 First | Nar | ne |
| Child 2 First | Nar | ne |
| Child 3 First | Nar | ne |
| Child 4 First | Nan | Parent Signature Date |
| | | |



Religious Education Fees 2014-2015 Please Note: Full Registration fee is due at Registration

Basic Fee Rate

| 1 Child | \$80 |
|---|------|
| 2 children | |
| 3 Children | |
| additional children add \$60 each | |
| Additional Fee for 1 st Communion/1 st Reconciliation | |
| Preparation per child -each year | |

Please Note: If you are volunteering to be a catechist, Classroom Aide or Substitute, please talk to Nancy and we will create a worksheet for you to submit with your registration fee.

Payment V

| + sample: | | | |
|---|-----------------|------------------------------------|---------------------------------------|
| worksheet sample: Questions | Your Answers | Amount Due | |
| # of children | 3 | 210 | |
| If paid on or before July 15 Subtract -\$10 per child (early bird discount) If paid after September 1 Add +\$25 per child (late fee) | July 1 | -30 NOTE: you m if you are subt | ust put in the minus sign (-) racting |
| Subtotal | | 180 | |
| How many children are in the process of preparing for 1 st Communion (either 1 st year or 2 nd year) Add \$35 per child | 2 | +70 | |
| Grand total due at time of registration | | 250 | |

Payment worksheet

| Questions | Your Answers | Amount Due | |
|---|-----------------|------------|-----------------------------------|
| # of children | | | |
| If paid on or before July 15 | | | |
| Subtract -\$10 per child (early bird discount) | | | |
| If paid after September 1 | | | : don't forget the minus sign (-) |
| Add +\$25 per child (late fee) | | if you | are subtracting! |
| Subtotal | | | |
| How many children are in the process of preparing for 1 st Communion (either 1 st year or 2 nd year) | | | |
| Add \$35 per child | | | |
| Grand total due at time of registration | | | |

Please make all checks payable to: **St. Joseph's Religious Education** - If you have a problem paying the whole amount, please talk to Olga or Fr. Jim to make arrangements!

 $^{^{\}circ}$ Payment to Confirmation Program is separate – reductions do not apply.



| St. Joseph | al Consent Pa | ge |
|---|---------------------|-------------------------------------|
| religious Education Family Last Name: | | |
| Are you registered at St. Joseph? | Yes | Envelope # |
| | No | |
| If no, which parish are you registered at? | | |
| Why did you choose this program? | | |
| Would you like to register your family at | Yes | |
| St. Joseph Parish? | No | |
| Please complete the Parish Registration Form | n (attached) | |
| Please list all family members living a | i nome including p | parents, give ages of all children. |
| As a parent, I would like to know more interested in: | about the Catho | olic Faith. I or my spouse would be |
| Information on the Rite of Chri | istian Initiation f | for Adults, (RCIA). |
| Having our marriage blessed in | the Catholic Chu | rch. |
| Receiving the Sacrament of Cor | nfirmation. | |
| All Deventes | | |

All Parents:

My child has permission to participate in the St. Joseph Religious Education Program and I understand that I am expected to volunteer for 3 events including the Parish Fair in the RE Booth.

Early Childhood Parents: I understand that I must remain on campus during class

My family will respect all parish property and follow the traffic and parking patterns.

REMINDERS:

| P | A copy of your | child's Baptism | Certificate is required | for first time registrants. |
|----------|----------------|-----------------|-------------------------|-----------------------------|
|----------|----------------|-----------------|-------------------------|-----------------------------|

| Parent | |
|------------|-------|
| Signature: | Date: |
| | |

St. Joseph Parish Registration Form

| Family Name: | | Date: | |
|--------------|------|-------|-----|
| Address: | City | | Zip |
| Telephone | | Email | |

| List Only those Living with you | (Include Last | Date of Birth | Religion | Baptized | Communion | Confirmation | Occupation |
|-----------------------------------|---------------|---------------|----------|----------|-----------|--------------|------------|
| name if different) | | | | Y or N | Y or N | Y or N | |
| Head | | | | | | | |
| Spouse | | | | | | | |
| Children | M/F | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Others living with you - relation | n | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Confidential Parish Census