

REGISTRATION FOR ST. JOSEPH RELIGIOUS EDUCATION PROGRAM 2024/2025

(Please answer completely and print clearly)

Are you a registered family and active budget contributor of St. Joseph Church? Yes No
You must be registered in the Parish to participate in the Religious Education Program. Please register at the Rectory.

FIRST HOLY EUCHARIST IS A TWO-YEAR PROGRAM BEGINNING IN GRADE 1.

CONFIRMATION IS A TWO-YEAR PROGRAM BEGINNING IN GRADE 8. *Completion of our Parish grade 7 Program on "The Creed" is a prerequisite.*

All school aged children, not just those receiving sacraments, should be registered for Religious Ed Program

FAMILY LAST NAME(S): _____

GRADES K- 5 meet Sunday mornings 8:15AM-9:15AM **OR** Monday evenings 6:00PM-7:00PM (**please notate choice**)**
GRADES 6 & 7 meet on Sunday evenings 6:00PM-7:15PM **OR** Monday evenings 6:00PM-7:15PM (**please notate choice**)**
CONFIRMATION 1 GRADE 8 meet on Sunday evenings from 6:00PM-7:30PM
CONFIRMATION 2 GRADE 9 meet on Sunday mornings from 10:30AM-12:00PM (**please note morning time**)

| STUDENT'S NAME | | | GRADE (Sept 24) | BIRTH DATE | CLASS DAY CHOICE** |
|----------------|--------|-------|-----------------|------------|--------------------|
| First | Middle | Last | | | |
| _____ | _____ | _____ | _____ | _____ | _____ |
| First | Middle | Last | | | |
| _____ | _____ | _____ | _____ | _____ | _____ |
| First | Middle | Last | | | |
| _____ | _____ | _____ | _____ | _____ | _____ |

If your child is entering the Sacramental Programs, please bring a copy of the child's Baptismal and First Communion certificate, if applicable, prior to the beginning of the Program. NO copy is needed for Sacraments received at St. Joseph.

Parent Name: _____ Religion: _____

Parent Name: _____ Religion: _____

Marital Status (*Please circle*): Married Divorced Widowed Single Separated

FULL MAILING ADDRESS (inc ude town/zip): _____

Parent e-mail: _____ Youth (grades 6-9) e-mail: _____

Home Telephone: _____ Cell/Emergency: _____

Any medical information/conditions we should be aware of while your child is in class? _____

Please review the Parish picture waiver information in your child's Parish Family Handbook. Thank you

Parental involvement in the Religious Education Program is essential to its success. We ask each adult to please consider the following: (*Classes will begin on time ONLY if there are enough volunteers*)

Could you teach (co-teach) a class? (training provided) Yes No Grade _____

Could you be an aide or helper in the classroom each week? Yes No Grade _____

*The tuition fee for one child is \$55.00, and for 2 or more children in the same family is \$85.00. Please pay the tuition fee upon registration, if you are able. Please register early. **A \$10.00 late registration fee applies if you register after Labor Day to cover the additional shipping cost of purchasing the extra books.***

Office Use Only

Date paid: _____ Amount paid: _____ Cash _____ Check _____ # _____