

DIocese of Trenton Family Registration Form 2018/19

Family ID# _____

ST. MARY'S PARISH , 100 BISHOP LANE, MANAHAWKIN, NJ 08050

Date Received: _____

Initials: _____

(PLEASE PRINT CLEARLY) ARE YOU CURRENTLY REGISTERED IN ST. MARY PARISH? (CIRCLE ONE) YES NO

CHECK ONE: New Family _____ RE-REGISTRATION _____ (ASRCS) _____ E-MAIL _____

CIRCLE PROGRAM(S): PARISH PROGRAM FATIMA RCIA/CUP SUMMER HIGH SCHOOL HOME STUDY

FAMILY LAST NAME: _____ CUSTODIAL PARENT: _____

MOTHER'S NAME _____ MAIDEN _____ RELIGION _____ DECEASED _____

ADDRESS _____ City _____ ZIP _____

MOTHER'S PHONE # _____ WORK # _____ EMERGENCY # : _____

NATURAL FATHER'S NAME: _____ RELIGION _____ DECEASED _____

ADDRESS _____ CITY _____ ZIP _____

FATHER'S PHONE # _____ WORK # _____ EMERGENCY # _____

LEGAL GUARDIAN IF DIFFERENT _____ RELATIONSHIP _____

ADDRESS _____ CITY _____ ZIP _____

PHONE #: _____ WORK # _____ EMERGENCY # _____

WERE YOU REGISTERED IN OUR RELIGIOUS EDUCATION PROGRAM LAST YEAR?: YES NO

IF NOT ST. MARY'S PROGRAM, WHICH PARISH PROGRAM?: _____

ALL NEW STUDENTS MUST HAVE A COPY OF THE BAPTISMAL, PENANCE AND/OR COMMUNION CERTIFICATE OR A BIRTH CERTIFICATE IF NOT BAPTIZED, ATTACHED AT TIME OF REGISTRATION IN ORDER FOR THE CHILD TO BE ENROLLED IN THE PROGRAM

PLEASE LIST ALL STUDENTS WHO WILL BE ATTENDING CLASSES IN THE FALL OR SUMMER PROGRAM. WE DO NOT TAKE OR HONOR REQUESTS FOR CATECHISTS REGARDLESS OF THE REASON. STUDENTS ARE PLACED AS THEY COME INTO THE PROGRAM.

| Baptismal First Name (Last name if different) | Birthday | Choice of Class Day | Grade Attending In September | M/F | Issues (Put One) Yes or No (Explain on back of this form.) | Assigned Class and Teacher (Office Use Only) |
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2018/19

PROMOTIONAL RELEASE:

I also consent to the use of any videotapes and/or photographs in which my child(ren) may appear by the Diocese of Trenton and/or the parish. I understand that these materials are being used for promotion of parish Religious Education programs and/or activities, which may include recruitment and fundraising efforts.

PARENT/LEGAL GUARDIAN SIGNATURE: _____ **Date:** _____

Additional information:

2018/19

2018-2019 DATES AND TIMES FOR CLASSES.

ALL CLASSES ARE HELD IN THE RELIGIOUS EDUCATION CENTER, 100 BISHOP LANE, MANAHAWKIN, NJ, 08050

KINDERGARTEN: SUNDAY 10:15 AM TO 11:30 AM Only

GRADES 1-6: MONDAY - TUESDAY -WEDNESDAY - 4:30-5:45 PM

SUNDAY: 10:15 AM - 11:30 AM

STUDENTS WILL BE PLACED BY DAY AND TIME ON A FIRST COME FIRST SERVED BASIS, WHEN A DAY OR TIME IS FILLED STUDENTS WILL BE PLACED AS SPACE ALLOWS. THERE ARE NO EARLY PICK-UPS FOR STUDENTS. STUDENTS MUST ATTEND ENTIRE SESSION. STUDENTS CAN BE PICKED UP EARLY IN A FAMILY EMERGENCY ONLY.

GRADE 7: 1ST YEAR CONFIRMATION: MONDAY EVENINGS 6:30-8:00 PM

GRADE 8: 2ND YEAR CONFIRMATION: TUESDAY EVENING 6:30 TO 8:00 PM

HIGH SCHOOL I CONFIRMATION PROGRAM: MONDAY EVENING 6:30PM-8:00 PM

HIGH SCHOOL II CONFIRMATION PROGRAM: TUESDAY EVENING 6:30PM-8:00 PM

HOME STUDY: ONCE A MONTH ON A WEDNESDAY AS SCHEDULED 6:15-7:30 PM

FATIMA PROGRAM: (SPECIAL NEEDS CHILDREN) MONDAY 4:30-5:15 ALL GRADES (2-8)

RCIA/CUP: (Children who need Baptism or older children who need Penance & Eucharist) SUNDAY 10:15 -11:30 AM

9:00 AM MASS WITH THE CATECHIST AND CLASS IS REQUIRED. STUDENTS MUST ATTEND MASS WITH THEIR CLASS EACH WEEK NO EXCEPTIONS.

2018-2019 FAMILY TUITION - PLUS ANY SACRAMENT PREP FEE PER CHILD

ONE CHILD \$100.00

TWO CHILDREN \$125.00

THREE CHILDREN \$150.00

FOUR OR MORE CHILDREN 175.00

CATECHIST – CO-CATECHIST – AIDE – HALL/SUB NO FAMILY FEE MUST PAY SACRAMENT PREP FEE PER CHILD

HALL MONITOR VOLUNTEERS: ONE CHILD \$0.00 - TWO CHILDREN \$25.00 – THREE \$50.00 FOUR OR MORE CHILDREN \$75.00 PLUS SACRAMENT PREPARATION FEES WHERE APPLICABLE.

SACRAMENT PREP FEES : FIRST COMMUNION PREP FEE \$35.00 PER CHILD

CONFIRMATION PREP FEE \$50.00 PER CHILD

ALL SAINTS SCHOOL 2ND GRADE FEES: \$25.00 PER CHILD PLUS \$35.00 COMMUNION PREP FEE - TOTAL COST \$60.00 PER CHILD

ALL SAINTS SCHOOL 8TH GRADE STUDENTS - SAME AS REGULAR STUDENT PLUS \$50.00 CONFIRMATION PREP FEE PER CHILD

VOLUNTEER POSITIONS NO TUITION

All of these positions require that you go through a back-ground check and fingerprinting. There is no guarantee to be with your child's class, but you will be the same time and day. (Volunteer Form must be completed at time of registration)

_____ Catechist Grade _____ Day: _____ Time _____ (full Tuition Less Sacrament Fee)

_____ Co-Catechist Grade _____ Day: _____ Time _____ (Full Tuition Less Sacrament Fee)

_____ Aide Grade _____ Day: _____ Time _____ (Full Tuition less Sacrament Fee)

_____ Hall Sub (Must be available to sub) Day: _____ Time: _____ (Full Tuition less Sacrament Fee)

_____ Hall Monitor Volunteer (Partial \$100) Other _____

RELIGIOUS EDUCATION OFFICE ONLY 2018-2019 School Year (Approved By: _____)

Family ID # _____ Family Last Name _____ Father _____ Mother _____

Children or Child Last Name if Different than Family Name _____

Family Tuition Fee: (One Child \$100.) (Two Children \$125.) (Three Children \$150.) (Four or More \$175.)..... \$ _____

All Saints School Tuition Fee: (Number of Children (2ndGrade) _____ X 25.00.....
\$ _____

Sacrament Fee----Communion Per Child (Number of Children _____ X 35.00.....
\$ _____

Sacrament Fee ----Confirmation Per Child (Number of Children _____ X 50.00.....
\$ _____

Book Fee (Lost _____ or Additional Book _____) @ \$25.00 each.....
\$ _____

Volunteer Discount
\$(_____)

TOTAL AMOUNT DUE-.....
\$ _____

**** Attach Check or Cash Here*****

Previous Balance for Year or Years (_____ Inv. # _____) \$ _____

TOTAL WITH PREVIOUS BALANCE
.....\$ _____

Date Paid _____ Amount Paid \$ _____ Other _____

Check # _____ Cash _____ Inv. # _____ Dated Inv. Created _____ Statement Sent _____

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CUSTOMER RECEIPT (Tear at Perforated Line if Check or Cash is Attached: Give Customer Receipt

Receipt: _____

| | | | | |
|-------------------|---------------|------------|--------------|--------------|
| Family Name _____ | _____ | _____ | _____ | _____ |
| Date Paid _____ | Check # _____ | Cash _____ | Amount _____ | Inv. # _____ |

VOLUNTEER APPLICATION FORM 2018/2019

(THIS FORM MUST BE COMPLETED AT THE TIME OF APPLICATION)

NAME: _____

ADDRESS _____

CITY AND STATE: _____ ZIP _____

PHONE #: _____ WORK # _____ CELL # _____

EMAIL: _____

HAVE YOU BEEN FINGERPRINTED BY ST. MARY'S? _____ YEAR _____

HAVE YOU BEEN VIRTUS TRAINED? _____ WHERE: ST. MARY'S BGT. A.S.R.C.S

OTHER: _____

ARE YOU A CERTIFIED CATECHIST? _____

WERE YOU HERE LAST YEAR? YES NO

POSITION: (circle one)

CATECHIST CO-CATECHIST AIDE HALL MONITOR SUBSTITUTE ATTENDANCE

DAY: SUNDAY MONDAY MON EVE TUESDAY TUE EVE WEDNESDAY

