



# St. John the Evangelist

Religious Education Program

73 Murray Avenue

Goshen, New York 10924

Office: 845.294.6847 Email: [re@sjegoshen.org](mailto:re@sjegoshen.org)

Website: [sjegoshen.org](http://sjegoshen.org)



## Religious Education Registration 2019-2020

The office will be accepting registrations for the Religious Education Program 2019-2020 fall sessions online/in person starting May 20, 2019 @ 8 am as follows:

DAY	GRADE/TIME
SUNDAY	GRADES 1,2, AND ML1 / 9:00-9:50 AM
MONDAY	GRADES 3-7 / 3:45-5:15 PM
MONDAY	GRADES 3-7 AND ML2 / 6:30-8:00 PM
TUESDAY	GRADE K / 4:15-5:00 PM
TUESDAY	GRADES 3-7 / 3:45-5:15 PM
TUESDAY	GRADE 8 AND ML3 / 6:30-8:00 PM
HOME SCHOOL	GRADES 3-7 ONLY

\*\*\*\*Please note: Dismissal will be from inside the school. Since there are only eight classes for those preparing for Confirmation on Tuesday evening, there are **no absences allowed** (with the exception of an illness or emergency situation).

\*\*\*\*Please note: With the exception of volunteers and students with special needs, we do not accept requests for a specific Catechist.

All registrations will be handled online or in person and given priority in the order of receipt as to the space available. No registrations will be processed without ALL paperwork completed.

- ✓ The deadline for registrations is June 13<sup>th</sup>. After this date, the regular fee, with an additional \$25, will be charged per child.
- ✓ A textbook, along with other pertinent information, will be given to your child the first day of class.
- ✓ Volunteers are a vital part of the program's success and we ask you to consider helping in some capacity in our ministry.

If you have any questions, please feel free to call the Religious Education Office.



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## Religious Education Registration 2019-20

Please complete a separate form for each child being registered.

Student Name: \_\_\_\_\_  
First Middle Last

Address: \_\_\_\_\_  
Street City State Zip Code

Telephone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_ Child's Birth date: \_\_\_\_\_ Male: \_\_\_ Female: \_\_\_

Child lives with both parents: \_\_\_\_\_ Other: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Family Name if different from Child's: \_\_\_\_\_

### Father

### Mother

First Name:	First Name:
Last Name:	Last Name:
Religion:	Religion:
Occupation:	Maiden Name:
	Occupation:

Name of Public School attending: \_\_\_\_\_

School Grade in September: \_\_\_\_\_ Religion Grade in September: \_\_\_\_\_

If there are other children in the program, please give grades: \_\_\_/\_\_\_/\_\_\_/\_\_\_

If your child is a new registrant, (except 1<sup>st</sup> Grade) indicate the name of the Religious Education program last attended: \_\_\_\_\_

Grade: \_\_\_\_\_ and present a letter from the previous parish to the Coordinator.

**\*\*All new Registrants must provide a copy of Sacraments at time of registration.**

**\*\*It is in the best interest of the Religious Education program not to accept requests for specific Catechists.**

### Medical/Special Needs Information

Allergies: \_\_\_\_\_ Medicines: \_\_\_\_\_

Disabilities: (physical, learning, emotional) \_\_\_\_\_

## Sacramental Records:

Baptism:	Yes:	No:	Date:	Church:
Reconciliation:	Yes:	No:	Date:	Church:
Communion:	Yes:	No:	Date:	Church:

## Class Schedules:

GRADE	DAY	CLASS TIME	CHOICE
Grade K	Tuesday	4:15-5:00 pm	
Grades 1, 2, & ML1	Sunday	9:00 a.m. – 9:50 a.m.	
Grades 3, 4, 5, 6 & 7	Monday	3:45 p.m. – 5:15 p.m.	
Grades 3, 4, 5, 6, 7, & ML2	Monday	6:30 p.m. – 8:00 p.m.	
Grades 3,4,5,6, & 7	Tuesday	3:45 p.m. – 5:15 p.m.	
Grade 8 & ML3 Only	Tuesday	6:30 p.m. – 8:00 p.m.	
Home School Grades 3-7			

**\*\*Attention Homeschoolers:** I agree to weekly interactive lessons and reviews online with my child @ [www.christourlife.com](http://www.christourlife.com) (reviews are submitted weekly to [re@siegoshen.org](mailto:re@siegoshen.org)), to attend three meetings a year (both student and parent teacher) for book review and parent meeting, Stations of the Cross (at least once), Adoration (at least once), Family Catechesis (once a year), regular Confession, and Mass every week and Holy Day of Obligation (Mass cards will be distributed and placed in a receptacle near Fr. George outside Mass). You will be contacted via email with all the particulars. Failure to comply with all obligations may result in your child returning to the Religious Education Program or repeating the grade.

## Early Fees (before 6/13/19):

<i>A.</i>	<i>Family using the weekly envelopes regularly at least six months prior to date of registration. Envelope number required: _____. \$110.00 per child/\$195.00 per family of 2 or more students.</i>
<i>B.</i>	<i>Family registered in the Parish NOT using envelopes. \$185.00 per child/\$285.00 per family of 2 or more students.</i>
<i>C.</i>	<i>Fee for Grade 8 ONLY (separate from other Grades.) \$95.00 per child includes Registration and Confirmation. \$80.00 per child if using a previously purchased robe from 2006 to present.</i>

Please make check payable to: St. John's Church.

**Regular Fees:** Deadline for Early Registration is June 13, 2019. Add \$25.00 per student late fee afterwards.

## Statement:

I acknowledge receipt of:

- A. St. John's Religious Education Program Handbook (available online) and I agree to comply with all policies.
- B. Informational material regarding our Safe Environment Program (available online and at registration).
- C. I give my permission to have my child photographed during any church event.

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# **Student Information Record 2019-2020**

*This form must be returned with Registration*

*Name:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*Date of Birth:* \_\_\_\_\_ *Home phone Number:* \_\_\_\_\_

*Father's Name:* \_\_\_\_\_ *Business Phone/Cell:* \_\_\_\_\_

*Business Address:* \_\_\_\_\_

*Mother's Name:* \_\_\_\_\_ *Business Phone/Cell:* \_\_\_\_\_

*Business Address:* \_\_\_\_\_

*Legal Guardian's Name:* \_\_\_\_\_ *Business Phone/Cell:* \_\_\_\_\_

*Business Address:* \_\_\_\_\_

*Special Medical Condition:* \_\_\_\_\_

*Procedures to be followed if above condition present an emergency:*

\_\_\_\_\_

*Any special request for the dismissal of the child should be made on this form:*

\_\_\_\_\_

## **In Case of Emergency**

### **Persons to contact if Parent/Legal Guardian cannot be reached:**

*Name:* \_\_\_\_\_ *Phone/Cell:* \_\_\_\_\_

*Address:* \_\_\_\_\_

*Relationship:* \_\_\_\_\_

*Doctor for Emergency:* \_\_\_\_\_ *Phone/Cell:* \_\_\_\_\_

*Address:* \_\_\_\_\_

In case of accident or illness, I request that the representative of the Parish Catechetical Program contact me. If I am unable to be reached, I hereby authorize this representative to call the Physician indicated and to follow the Physician's Instructions. If it is impossible to contact this Physician, the representative of the Parish Catechetical Program may make whatever arrangements seem necessary. I agree to assume the financial responsibility for any diagnosis, treatment and/or medication deemed necessary.

To the best of my knowledge all information given is accurate and complete. I hereby consent to, and authorize the necessary procedures that have been stated above.

*Parent/Guardian Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

# Volunteer Help Is Needed For the 2019-2020 Program

Dear Parents:

If you can give your time in any of the areas listed below, please indicate so in the space provided next to the assignment.

Thank you for your consideration.

**Important!** *Catechist*  
(Will train and support)      Grade \_\_\_\_\_ Day \_\_\_\_\_

**Important!** *Substitute Catechist*  
(Will train and support)      Grade \_\_\_\_\_ Day \_\_\_\_\_

*Weekly Classroom Assistant*  
(Needed in all classes)      Grade \_\_\_\_\_ Day \_\_\_\_\_

*Monitors 15 minutes*  
*Prior to class*      Grade \_\_\_\_\_ Day \_\_\_\_\_

*Hallway Monitors*      Grade \_\_\_\_\_ Day \_\_\_\_\_

*Office Help (during class time)*      Grade \_\_\_\_\_ Day \_\_\_\_\_

*Traffic Monitor at Dismissal Time*      Day \_\_\_\_\_

*Bingo Worker once a month on Thursday Evening @ 5:45-9:45\_\_\_\_\_*

Print Name: \_\_\_\_\_

Signed: \_\_\_\_\_

Child's Grade/s in September 2019: \_\_\_\_\_

Telephone: \_\_\_\_\_