

# Religious Education Registration Form (PS-12th) 2017-2018

**Forms *\*\*Due by August 1, 2017 and ALL students MUST pre-register yearly\*\****

**Please circle your parish: Mary Help of Christians St. Paul St. Peter St. Joseph**

Please list parental and student information as it should appear on certificates, invitations and announcements

Parent/Guardian Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Mother's Cell # \_\_\_\_\_

**Email** \_\_\_\_\_ Father's Cell # \_\_\_\_\_

Preferred form of Contact:  E-mail OR  Text Message

*We will be using REMIND to keep in touch throughout the year, REMIND uses text & Email to send reminders and updates. **Newsletters** - These will be sent via Remind, but please be sure your e-mail address is listed above. Newsletters and information is also available on the cluster website at [www.fortrecoverycatholics.org](http://www.fortrecoverycatholics.org).*

**Registration fees per student are as follows with a Maximum Fee per family of \$150/family total**

**Every other Sunday - Preschool (ages 3-5/potty-trained) & Kindergarten - \$30.00 per child**

**Wednesday Evening - Grades 1-12 - \$50.00 per child**

Please make checks payable to your parish Religious Ed Program: MHC, St Paul or St Peter/St Joe (combined)

**For assistance/payment plan options contact the CRE at 419-375-4153 or [cre@fortrecoverycatholics.org](mailto:cre@fortrecoverycatholics.org)**

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_ / \_\_\_ / \_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

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First, Middle and Last Name \_\_\_\_\_ Birthday \_\_\_ / \_\_\_ / \_\_\_ Gender M or F

'17-'18 Grade \_\_\_\_\_ Medical Information/Conditions/Medications or Restrictions \_\_\_\_\_

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Total Family Fee (Max \$150/Family) \_\_\_\_\_ Amount Paid \_\_\_\_\_ Date Paid \_\_\_ / \_\_\_ / \_\_\_

Check # \_\_\_\_\_ Cash: \_\_\_\_\_

Teacher/Teacher Aide \_\_\_\_\_ **Yes, I could help weekly/bi-weekly as a volunteer aide or sub**  
\_\_\_\_\_ **Yes, I can help occasionally with parties/activities/as an aide**  
\_\_\_\_\_ **I would be interested in being a volunteer substitute teacher**  
\_\_\_\_\_ **Yes, I could bring snacks or supplies for special events**

### **POLICY FOR DISCIPLINE**

Only by mutual respect does effective learning take place in our Religious Education Programs. This is vital for the spiritual, emotional and physical well being of all our students and staff that common courtesy be present in the Fort Recovery Cluster Religious Education classes. As a religious education program, we encourage active participation from students and parents/students acknowledge that there will be no name calling, bullying or unruliness tolerated. Students should be kind, courteous and respectful to all other students, Catechists, subs and volunteers assisting with activities.

Should there be a disturbance or disciplinary problem with a student, a note will be sent home by the Catechist for the parents/guardians to sign and return, outlining the situation that occurred. Should a second occurrence take place, the CRE will be notified and will set-up a meeting with parents/guardians, student(s), catechist(s) and all parties involved. If a third occurrence or continuance of inappropriate behavior continues, the student will be allowed to return to class only if accompanied by a parent or guardian. If the student's behavior remains unacceptable the parent's or guardian will continue attending the class to supervise the student.

\*\*\* We/I \_\_\_\_\_ have read & understand the Policy of Discipline & also acknowledge that all forms including Registration and Archdiocese Medical Release Forms are completed to the fullest extent and submitted. By submitting this information by August 1, 2017 for your child/children to participate in the religious education programs, this allows time for materials to be purchased, instructors to prepare and room assignments to be made.

If you wish to have a receipt for your records please remove the section below.

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Family Name: \_\_\_\_\_ Total Fees: \_\_\_\_\_

Paid: \_\_\_\_\_ Date: \_\_\_\_\_ Balance: \_\_\_\_\_