

Religious Education (CCD)- St. Rose, Belmar

Registration Form 2024-25

Register by Aug. 1 For Discount – All Registration due Sept. 1

(use this form or Register At www.strosebelmar.com-Relig Ed.)

Please fill out both sides.

Check one: **First-Time (new) REGISTRATION** **RE-REGISTRATION**

Family Name: _____ **TODAY'S DATE** _____

To Whom do we address the mail (if other than Mr. & Mrs.): _____

Address: _____

Town: _____ Zip: _____

Home Phone: _____

Primary Contact # _____ who? _____

Father's Name: _____ **Catholic?** Y ___ N ___

cell# _____

Mother's Name: _____ **Catholic?** Y ___ N ___

cell# _____ **Maiden Name:** _____

Can we use Mom's Cell (for text msg.- imp. Info, cancellations etc.)? _____

If not, to what cell # can we send a text? _____

_____ We have no text feature.

Alt. Emergency Contact # _____ who? _____

when parents cannot be reached.

Children Reside With: ___ FATHER ___ MOTHER ___ STEP-PARENT ___ OTHER

Are Parents: ___ Married ___ Divorced ___ Other _____

*****If applicable/ Custodial parent? _____

E-mail address to send imp. information: _____

Check: Same e-mail address as last year? New E-mail? No E-mail

(Note: We are using E-mail (called Flocknotes) as our primary means of communication)

Check ONE: We are registered in St. Rose Parish and receive envelopes/pay online.

We are registered at another Parish. My parish is: _____

We are not registered at any parish, send us a form.

PERMISSION TO USE YOUR CHILD'S WORK OR PHOTO WITHIN THE PROGRAM

_____(initial) As the parent/guardian of the children listed on this form I give permission for his/her picture/ work to be displayed at church or school, posted on the parish website or published in the parish bulletin or local newspaper **without** names. Please list any restrictions:

VOLUNTEERS AND ASSISTANCE: (Please indicate any area of interest)

Catechist- _____ **Preferred Grade?** _____ **Aide** _____

Monday Afternoons 4:30-5:40 K-7th **Tuesday Evenings 7:00-8:15 6th-8th**

_____ Aide; _____ Substitute Teacher; _____ Hall Monitor:

OVER; please fill out both sides—

RELIGIOUS EDUCATION CLASS SCHEDULE:

Monday Afternoons 4:30-5:40 K-7th Tuesday Evenings 7:00-8:15 6th-8th;

Home Study-GR. 3-6 for Exceptional Circumstances (must be pre-approved by August 1st)

First grade is REQUIRED before First Communion in 2nd. Kindergarten optional. Special classes available for older or high school students needing Sacraments.

****** PLEASE FILL OUT ONE SECTION FOR EACH CHILD**

Child's Name: _____ M _____ F _____

Public School Attending: _____ **Gr. for RE in September** _____

Home Study **Pre-Approved?:** _____ **Gr. 6,7 only** – choose: Mon. or Tues.(space limited)

G. 6,7 on Mondays – Permission to be released at dismissal without signing out? _____

Does your child receive Special Ed. services in School? _____ If so, Does s/he have an IEP? _____ or 504 _____

Anything else we should know about your child _____
any allergies? _____

If new registrant: Date of Birth _____ Place of birth _____

Approx. Date, Church, City of Baptism _____

***If new registrant or going into 2nd or 8th grade, please attach ORIGINAL Baptismal Certificate; we will return.**

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TUITION FEES: Those not registered by Sept. 1st will not be able to start until 2nd class

1 Child \$150. Discount \$100. – If Fee and Registration returned by Aug. 1st

2 or more Children \$225. Discount \$175 – If Fee and Registration returned by Aug. 1st

*******Add SACRAMENTAL FEE \$50.00 per child for students entering 2nd and 8th gr.**

First payment due now for all (minimum \$50. before Aug. 1st to lock in discount rates.)

Checks payable to: THE CHURCH OF ST. ROSE OR use Cash, & regis. form)

PARENT/ GUARDIAN SIGNATURE: _____

Financial hardship? Speak with us -Give any small amount now, We will bill monthly beginning in September—then pay what you can when you can if you can