

**St Junipero Serra Parish**  
**Religious Education 2018-2019 Registration**  
**50 E Street, Seaside Park, NJ 08752**  
**(732.793.0041) www.stcatharinesiena.com**

Date Rec'd \_\_\_\_\_  
 Bapt. Cert. Rec'd \_\_\_\_\_  
 Transfer Rec'd \_\_\_\_\_  
 Session: \_\_\_\_\_

**STUDENT RECORD**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ **M F** (circle one)

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

Birth Date: \_\_\_\_\_ School Attending (Sept. 2018) \_\_\_\_\_ School Grade (Sept. 2018) \_\_\_\_\_

**RELIGIOUS EDUCATION INFO**

Has your child missed any Religious Education Grades?  
 Yes  No  
 If yes, which grades? \_\_\_\_\_  
 Religious Education Grade ( Fall 2018) \_\_\_\_\_  
 Session Preference:  
 Wed. 4:30 - 5:45pm Grade \_\_\_\_  
 Wed. 6:15 - 7:30pm Grade \_\_\_\_  
 Wed. Confirmation Class 6:00 - 7:30pm

**SACRAMENTAL RECORD**

Baptized Catholic?  Yes  No  
 Baptized in another denomination?  Yes  No  

***New Registration:** If your child was  
 baptized outside this parish, you ***must*** attach  
 a copy of their birth certificate and baptismal certificate  
 along with 1st Penance and 1st Holy Communion  
 certificates for those that have received  
 those Sacraments.*

Does your child have any of the following? (if yes, please explain):

- a. Learning Differences?  
 Yes  No \_\_\_\_\_
  - b. Special Needs?  
 Yes  No \_\_\_\_\_
  - c. Allergies?  
 Yes  No \_\_\_\_\_
- May this information be shared with the teacher? Yes  No

**FAMILY RECORD**

**Parent #1:**  
 Last Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Religion: \_\_\_\_\_

**Parent #2:**  
 Last Name: \_\_\_\_\_  
 First Name: \_\_\_\_\_  
 Cell Phone: \_\_\_\_\_  
 Religion: \_\_\_\_\_

**FAMILY EMAIL:** \_\_\_\_\_  
***(Important! This is our primary source of communication)***

**EMERGENCY RECORD**

1. Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Are there any custodial issues we should be aware of?  Yes  No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

**VOLUNTEER INFORMATION**

Please check any skills or talents that you are willing to share:

- Religious Education teacher
- Teacher's assistant
- Substitute teacher
- Substitute assistant
- Door monitor
- Attendance officer

ALL VOLUNTEERS WHO COME IN CONTACT WITH CHILDREN MUST BE FINGERPRINTED AND ATTEND A VIRTUS AWARENESS SESSION.

Phone Number \_\_\_\_\_

**Registration Fees:**

- 1 child: \$100.00
- 2 children: \$150.00
- 3 or more children: \$175.00

All registrations are due in the Parish Office ***no later than June 29th.***

**Make checks payable to:  
St. Catharine's Church**

**Office Use ONLY**

Total Amount Due \_\_\_\_\_

Cash \_\_\_\_\_ Amount \_\_\_\_\_

Ck # \_\_\_\_\_ Amount \_\_\_\_\_

Date \_\_\_\_\_ Balance \_\_\_\_\_

**Release: Please check one box and sign below.**

- I consent to the use of any video and/or photographs in which my child may appear by the Diocese of Trenton and/or the Parish. I understand that these materials are **only** being used for promotion of the parish Religious Education program and/or activities which may include recruitment and fundraising efforts.

I certify that all information provided above is true and complete to the best of my knowledge. I also understand that by signing below, I am making a commitment to the Religious Education program at St. Junipero Serra wherein regular attendance at Mass and classes are expected.

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

- I DO NOT consent to the use of video and or photographs in which my child may appear by the Diocese of Trenton and/or the Parish

I certify that all information provided above is true and complete to the best of my knowledge. I also understand that by signing below, I am making a commitment to the Religious Education program at St. Junipero Serra wherein regular attendance at Mass and classes are expected.

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