

# ST. JOACHIM PARISH

## RELIGIOUS EDUCATION 2019-2020 REGISTRATION

Registration Now through August 11, 2019

\* Late Registration Begins August 12, 2019

**\*\*PLEASE NOTE: THE RELIGIOUS EDUCATION OFFICE WILL BE CLOSED DURING THE MONTHS OF JUNE AND JULY!**

Classes are held on Tuesdays at St. Joachim School 601 W. Browning Road, Bellmawr, NJ

Levels - 1, 2 & 3 Day Session 3:30pm - 4:45 pm  
Levels - 1 thru 8 Evening Session 6:45pm – 8:00 pm

*There is limited space for Levels 1 thru 3 in our evening session – students are assigned if they have older siblings in grades 4 thru 8. Any available seating is then on a first come-first serve basis.*

### **IMPORTANT SACRAMENTAL PREPARATION INFORMATION:**

- For First Holy Communion, children prepare for this Sacrament during their 1st and 2nd Level years of faith formation.
- For Confirmation, children prepare for this Sacrament from Levels 3 through 6 with final preparation during their 7th and 8th Levels.

### **St. Joachim Religious Education Office Contact Information:**

601 W. Browning Rd., Bellmawr, NJ 08031  
Religious Ed Office: 856-931-8590  
Office e-mail: [stjoachimreligiouseducation@gmail.com](mailto:stjoachimreligiouseducation@gmail.com)  
Website: [www.StJoachimParish.net](http://www.StJoachimParish.net)

Office Hours: Monday through Thursday 8 AM until noon.  
Closed on Fridays.

**SEE OTHER SIDE FOR TUITION DETAILS / IMPORTANT DATES.**

No payments will be accepted in the Parish office. There is a **lock box near the front door of the school** for payments, paperwork, etc., for your convenience.

(over)

## RELIGIOUS EDUCATION TUITION DETAILS

One Child	- \$100
Two or More Children	- \$175

*\*Families registering after August 11 will be charged a \$25 registration late fee.*

**Please note: The Religious Education office will be closed during the months of June and July.**

**Registration fee is due prior or on the first day of school, September 10, 2019, unless a quarterly or bi-annual payment plan option is chosen:**

- Please see & indicate your payment plan on the registration form.
- **For all children entering Level 1, or new to our program, you must register in person and provide a copy of his/her baptismal certificate if not baptized at St. Joachim, St. Anne, St. Maurice, or St. Rita.**

## **IMPORTANT DATES**

**Tuesday, September 10, 2019 --- Parent Information Meeting**

**7:00 PM** – All Parents/Guardians and students are asked to meet in the Church. New guideline and family handbooks will be given out that evening.

*(Each family is asked to have at least one Parent/Guardian in attendance.)*

**Tuesday, September 10, 2019 --- Opening Sessions**

3:30 PM – 4:45 PM --- Afternoon session for Levels 1, 2 and 3

6:45 PM – 8:00 PM --- Evening session for Levels 1 through 8

**All families with children attending St. Joachim Religious Education should be registered in the Parish. This form is available from the Parish office.**

# ST. JOACHIM RELIGIOUS EDUCATION REGISTRATION FORM

2019-2020 FOR LEVELS 1-8 ONE FORM PER FAMILY

FAMILY NAME \_\_\_\_\_ Parish where family is registered \_\_\_\_\_

E-MAIL ADDRESS (REQUIRED) \_\_\_\_\_

(this is our main way of communicating with families, please give all email addresses with which you would like to receive notifications)

Father's Name \_\_\_\_\_ Mother's Name \_\_\_\_\_

Street address \_\_\_\_\_ Street address \_\_\_\_\_

City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Home # \_\_\_\_\_

Cell # \_\_\_\_\_ Cell # \_\_\_\_\_

Work # \_\_\_\_\_ Work # \_\_\_\_\_

Child lives with Father \_\_\_\_\_ Mother \_\_\_\_\_ Both \_\_\_\_\_ Other \_\_\_\_\_ (provide info below)

Child(ren)'s PRIMARY CARE TAKER if not a parent: \_\_\_\_\_

Relationship to child: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

Street address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home # \_\_\_\_\_ Cell # \_\_\_\_\_ Work# \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ (someone other than parent/guardian)

Phone #: \_\_\_\_\_ Relationship to child: \_\_\_\_\_

CHILD'S FULL NAME	CCD Level	Level 1, 2 and 3	Public School	Birth	Male or
	For year	Indicate Day	& Grade	Date	Female
	2019-2020	or Eve Session	2019-2020		
		preference			
_____					M / F
_____					M / F
_____					M / F
_____					M / F

## Tuition Payment Information (Please indicate option below)

1 Child - \$100.00

2 or More Children - \$175.00

\_\_\_\_\_ I will pay tuition in full by September 10, 2019

\_\_\_\_\_ I will pay tuition quarterly (payments due Sept. 10, Nov. 1, Feb. 1 and April 1)

\_\_\_\_\_ I will pay tuition bi-annually (payments due Sept. 10 and Feb. 1)

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**For office use only:** Total enclosed: \_\_\_\_\_ Check # \_\_\_\_\_ Cash: \_\_\_\_\_ Date: \_\_\_\_\_

Processed by: \_\_\_\_\_

Incomplete paperwork; family contacted: \_\_\_\_\_

Paperwork complete; child(ren) placed: \_\_\_\_\_

# of Registered Children \_\_\_\_\_

**SACRAMENT INFORMATION – To be completed for new students only. Please indicate the name of Parish and date where sacraments were received, along with a copy of the Baptismal certificate.**

**BAPTISM:** \_\_\_\_\_

\_\_\_\_\_

**RECONCILIATION:** \_\_\_\_\_

\_\_\_\_\_

**FIRST EUCHARIST:** \_\_\_\_\_

\_\_\_\_\_

**MEDICAL INFORMATION**

**Child(ren)'s Name and Level**

1. \_\_\_\_\_ 3. \_\_\_\_\_

2. \_\_\_\_\_ 4. \_\_\_\_\_

**Please list any special conditions that may affect your children, such as physical, emotional or learning issues, allergies to food, etc. We appreciate enough information to enable us to be sensitive and responsive to your child's needs. Please list child(ren)'s name and level.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent/Guardian Media Consent Form**

We are sending you this parental consent form both to inform you and request permission for your child's photo/image, *without any personally identifiable information*, to be published on the parish web site or posted in our parish church or school. Pursuant to law, we will not release any personally identifiable information without prior written consent from you as parent or guardian. Personally identifiable information includes student names and any personal information. If you, as the parent or guardian, wish to rescind this agreement, you may do so at any time in writing by sending a letter to the office and such rescission will take effect upon receipt.

**Please check one of the following choices:**

I/We GRANT / \_\_\_\_ I/We DO **NOT** GRANT \_\_\_\_ permission for a photo/image that includes this student *without any personal identifiers* to be published on St. Joachim's Internet site or posted in our Church Gathering space or the School.

**Students Names (print)                      Grade                      Students Names (print)                      Grade**

\_\_\_\_\_  
\_\_\_\_\_

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