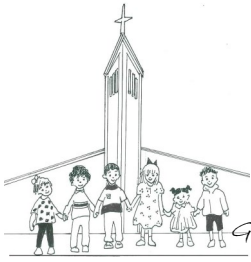


**2018-2019 RE Registration Packet**  
**Enclosed**

New this year...  
For grades 1-3 on Wednesdays  
and Sundays:  
Family Class, once per month,  
*parents will attend with their  
child/children...*  
Activities, games, guest speakers!



See schedule on our website



**St. Catherine of Siena Church**  
 Department of Religious Education

*Growing in Faith through Prayer, Scripture, Worship, Community, Sacrament, and Service*

Dear Parent,

Thank you for giving us the privilege of working with your children. This year we are introducing family catechesis, for families with children in 1st - 3rd grade. Parents will attend with their children, participate in activities, and then children will go to their classrooms while parents enjoy special presentations. The schedule is on our website and more details will be given at the parent meetings.

The enclosed registration form is due by August 31. Early registration helps us with planning. Please note tuition increases by dates below. Class preferences will be based on the order the registrations are received. The forms can be mailed or dropped off at the Religious Education office. Please return the following:

The attached **registration form**. Indicate the day and time you prefer for CCD class for each child:

<u>Grade</u>	<u>Day &amp; Time</u>
PK3 & PK4	Sundays, 9:30 - 10:30 AM (\$25 tuition)
K-4	Sundays 10:00 - 11:25 AM or Wednesdays 6:00 -7:15 PM
5-7	Wednesdays 6:00 - 7:15 PM
8th (Confirmation Prep)	Sunday 10:00 - 11:25 AM , followed by 11:30 Mass.

Your **payment**. For PK3 & PK4 children, the tuition is \$25, due at registration. For other grades, at least half payment is due at registration. See below for the tuition. Complete payment is due by Jan. 31, 2019.

<u>Tuition for K-8: Registration by June 30</u>	<u>Registration by July 31</u>	<u>Registration by Aug 31</u>
1 child.....\$ 150	1 child.....\$175	1 child.....\$200
2 children ...225	2 children..... 250	2 children.....275
3 or more....250	3 or more .....275	3 or more.....300

**Coverage for additional materials for children preparing to receive First Communion/Reconciliation: \$35**

**Important Dates:**

**Aug. 31** - Registration forms due (forms turned in after this date will be considered late and there will be a \$25 fee)

**Sept. 16** - First Sunday class (10-11:25 AM followed by 11:30 Mass) and parent meeting 10 - 10:30

**Sept. 19** - First Wednesday class. Mass for students and parents; parent meeting after Mass (6 - 7:15)

Any special accommodations/requests must be made in writing by August 31. Although we will try to accommodate requests, it is not always possible, since the classes need to be balanced. If you have any questions please call the Religious Education Office. Thank you for your support.

God bless you,

Mrs. Debbie Schmalen, DRE

**St. Catherine of Siena Parish  
Religious Education Registration 2018**

Today's Date: \_\_\_\_\_  
 New Registration? \_\_\_\_\_  
 Returning? \_\_\_\_\_

Family Name \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City/ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Phone # \_\_\_\_\_  
 \*Email: \_\_\_\_\_

*\*Email addresses are used **only** for our communication with you. It will not be shared.*

Office Use:
Date: _____
Elem Tuition: _____
Sacrament Prep: _____
Conf Tuition: _____
Amt Paid: _____
Cash: ___ Check# _____

**What is the best way to contact you?** \_\_\_\_\_

Registered at this Church: Y N **Note:** If you are not registered in our parish, we ask you also fill out a parish registration form. Call the parish office at 847-426-2217

**Parents/Guardians (List Below)**

Relationship to child: _____	Relationship to child: _____
Name: _____	Name: _____
Cell Phone: ( ) _____	Cell Phone: ( ) _____
Marital Status: _____	Marital Status: _____

**Children in Pre-K through 8th Grade:** *Note: 8th graders will be preparing for Confirmation (must have been in CCD or Catholic school in 7th grade)*

Student Name: _____	Attended CCD Here Before: Y N
Grade in Fall: _____	<b>Available class days/times; for K-4, circle preference:</b>
Birth Date: _____	<b>For K-4: Sun-10 AM OR Wed-6PM</b>
Birth City/State: _____	<b>For 5-7: Wed-6 PM</b>
	<b>For 8: Sun-10AM</b> <b>For PreK: Sun-9:30AM</b>

<b>Sacraments Received</b>	Date	Place Sacrament Received	Address of Church of Baptism:
Baptism: (Y/N) _____	_____	_____	_____
Reconcil: (Y/N) _____	_____	_____	Health Problems: _____
1st Comm: (Y/N) _____	_____	_____	Learning/behavioral Needs: _____

Anything else we need to know about your child: \_\_\_\_\_

Student Name: _____	Attended CCD Here Before: Y N
Grade in Fall: _____	<b>Available class days/times; for K-4, circle preference:</b>
Birth Date: _____	<b>For K-4: Sun-10 AM OR Wed-6PM</b>
Birth City/State: _____	<b>For 5-7: Wed-6 PM</b>
	<b>For 8: Sun-10AM</b> <b>For PreK: Sun-9:30AM</b>

<b>Sacraments Received</b>	Date	Place Sacrament Received	Address of Church of Baptism:
Baptism: (Y/N) _____	_____	_____	_____
Reconcil: (Y/N) _____	_____	_____	Health Problems: _____
1st Comm: (Y/N) _____	_____	_____	Learning/behavioral Needs: _____

Anything else we need to know about your child: \_\_\_\_\_

**To register additional children, list them on the back of the page.**

**Please fill out the back of this form with emergency contact information.**

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## St. Catherine of Siena Parish—Religious Education

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### Emergency Information

If in the event of an emergency, if you are unable to reach me, please contact the following:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_  
Comments: \_\_\_\_\_

### Emergency Treatment Release

As a parent/guardian, I authorize the treatment by a qualified and licensed medical doctor of the child(ren) listed on the front page in the event of a medical emergency, which in the opinion of the attending physician, may endanger his/her life, cause disfigurement, physical impairment, or undue discomfort if delayed. This authority is granted only after a reasonable effort has been made to reach me. Necessary first aid may be given at CCD.

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

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### Permission for Pictures

I grant permission for St. Catherine of Siena Religious Education to use pictures of my child(ren) in RE and parish communications, which would include parish bulletin articles and press releases.

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

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### CCD Policies and Procedures

Please note the following:

- There is only one drop-off and pick up entrance. The entrance is at the back of the school by the RE office (southeast door by the playground). Pre-K, K and 1st grade children must be picked up from their classrooms by a parent or designated adult when class is dismissed.
- If District 300 cancels classes for weather-related reasons, CCD classes will also be cancelled on that day.
- For your child's safety, please fill out an "Early Release Form" in the RE office if you need to pick up your child early from CCD class.
- Please check our website for more policies and procedures.

I have reviewed the CCD Policies and Procedures and agree to follow them.

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

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**To register additional children in PreK through 8th grade, please list them below:**

# Sacrament Preparation Form



Fill out the form below **only for children who will be in 2nd-8th grade** in the fall and have NOT received First Reconciliation (confession) and/or First Communion.

Note: For more information about our sacrament preparation program, check out our website: [www.stcatherinechurch.com](http://www.stcatherinechurch.com) - then click on Religious Education.

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**Child's name** \_\_\_\_\_

**Grade child will be in school this fall** \_\_\_\_\_

**Previous St. Catherine of Siena CCD enrollment:**

- Kindergarten     4th Grade     Enrollment at other Catholic church or school - please specify \_\_\_\_\_
- 1st Grade         5th Grade
- 2nd Grade         6th Grade
- 3rd Grade         7th Grade

**Sacrament preparation needed for (Check as many as apply):**

- Baptism
- First Reconciliation (Confession)
- First Communion

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**Child's name** \_\_\_\_\_

**Grade child will be in school this fall** \_\_\_\_\_

**Previous St. Catherine of Siena CCD enrollment:**

- Kindergarten     4th Grade     Enrollment at other Catholic church or school - please specify \_\_\_\_\_
- 1st Grade         5th Grade
- 2nd Grade         6th Grade
- 3rd Grade         7th Grade

**Sacrament preparation needed for (Check as many as apply):**

- Baptism
- First Reconciliation (Confession)
- First Communion

# Religious Education Volunteer Form – 2018-2019

(Our programs run on volunteers...can you help?)



I would be interested in helping in these ways:

## Regular CCD Classes:

- Catechist\* – Do you want your child in your class? \_\_\_\_\_  
Grade \_\_\_\_\_  
Day/Time \_\_\_\_\_
- Aide\*\* – Do you want your child in your class? \_\_\_\_\_  
Grade \_\_\_\_\_  
Day/Time \_\_\_\_\_
- Substitute Catechist  
Grades \_\_\_\_\_  
Day/Time \_\_\_\_\_
- Hall Monitor\*\* (during class – also assist with other RE needs)  
Day/Time \_\_\_\_\_
- Parking Lot Guard\*\*  
Day/Time \_\_\_\_\_

## Special Events:

- Baby-sitting on the day of First Reconciliation (January)
- First Communion Retreat Group Leader (April)
- Cross-stitch for First Communion crosses
- Musician
- Help with Christmas program
- Pray in the chapel during class
- Baby-sit during parent meetings
- Help with summer programs

## Comments/Other:

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\* Tuition waived

\*\* Tuition reduced with a weekly commitment

Note: Other than the substitute catechist, the above “regular” CCD volunteer jobs require a weekly commitment. The special event jobs are usually one-time commitments.

I cannot help at this time, but I will keep all those in the CCD program in my prayers.

Name(s): \_\_\_\_\_

Home Phone \_\_\_\_\_

\_\_\_\_\_

Cell Phone \_\_\_\_\_