



St. Joachim – St. John the Evangelist Religious Formation  
Registration 2019-2020  
60 Liberty Street, Beacon, NY 12508  
CCD 845.831.6550 Parish office 845.838.0915  
ONE PER FAMILY

“Let the children come to me.” Matthew 19:14

Family Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apartment # \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Father’s Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Mother’s Maiden Name: \_\_\_\_\_ Religion: \_\_\_\_\_

Father’s Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mother’s Occupation: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Emergency Contact, Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

Parish Registration: Are you a registered parishioner at St. Joachim / St John the Evangelist Parish?

Yes \_\_\_\_\_ No \_\_\_\_\_

Children’s Need:

Please indicate any medical needs that your child may have and, or allergies.

Please indicate anything that may affect your child’s ability to learn our faith. Include behavioral problems, special needs and family relationships, such as separation, divorce, or remarriage. Please be as specific as possible. All information is CONFIDENTIAL.

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

Over ->

**First Child fee: \$120.00, Every Child There After \$20.00 Communion Fee per child \$25.00 Late Registration Fee: \$25.00**

**Pleased indicate time preferred: 8:30-10:00am. 10:15-11:45am.**

**Time request based on first come/first served.**

Childs Name:	Gender:	Date of Birth:	Grade:	Baptism Place/Date:	First Communion Place/Date:
1) _____	_____	_____	_____	_____	_____
2) _____	_____	_____	_____	_____	_____
3) _____	_____	_____	_____	_____	_____
4) _____	_____	_____	_____	_____	_____

Parent's Statement: (Please read and sign)

Realizing that the parents are the first and most important teacher of their children, My children and I will participate in Mass, we are fully aware that the core teaching of our faith leads us to God through the Eucharist at Mass.

I will do my best to cooperate as full as possible with the staff of St's Joachim and John the Evangelist, in the religious education program of my children.

I understand that attendance in class is very important as only a short time is allocated for class each week. I am also aware that if my child misses four or more classes that he or she may not precede to the next level and that I will provide a written excuse for each absence. My child will also make-up any assignments that he or she may miss.

I hereby consent to the taking of photographs, movies, videos capable of reproduction in any medium, of me or my child/children of whom I am the designated guardian.

I hereby grant to the parish the right to edit, reproduce, use and re-use images for any and all purposes including, but not limited to advertising, promotion and display and I hereby consent to the editing, reproduction, use and re-use of said images in any and all media in existence and all media yet in existence including but not limited to, video, print, television, internet and pod-cast.

I forever grant, assign and transfer to the parish any right, title and interest that I and/or my child/children may have in any images, including negatives, taken of me and/or my children by the parish. I hereby agree to release, indemnify and hold harmless the parish from any and all claims, demands, actions or causes of action, loss, liability, damage or cost arising from this authorization.

Parent/Guardian

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

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For Office Use Only:

Amount Due: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Balance Due: \_\_\_\_\_

Check #: \_\_\_\_\_ Cash: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Parish Office- 2 Oak Street, Beacon, NY 12508 – Phone - 845.838.0915