

ST. FRANCIS XAVIER RELIGIOUS EDUCATION

REGISTRATION FORM

All Grades 2010/2011

125 Main Street, Acushnet, MA 02745

Tel: 508-998-7445 Fax: 508-995-1794

Student Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

Place of Birth \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ M F Grade in Public School as of 9/10: \_\_\_\_\_

Parents or Guardians:

Form with fields for Father's Name, Mother's Name, Religion, Address, City, Zip, Home Phone, Cell Phone, Email Address for both parents.

You must be a registered and active member of St. Francis Xavier Parish to participate in its Religious Education Program.

Please print your Parish Family Number here -> \_\_\_\_\_.

If you are not a member of our parish or not a practicing Catholic you must meet with Msgr. O'Connor or Mrs. Hammarquist.

\* If Tuition payment is a hardship, please contact the Director of Religious Education at 508-998-7445 so that arrangements can be made on a confidential basis.

\*\*Baptismal certificates are due upon all first time registration or Sacramental Year\*\*

Tuition: For the year: Levels 1,3,4,5,6,7 \$55.00 Level 2 (First Communion) \$55.00 (robe fee \$15.00 additional)
All tuitions are NON- REFUNDABLE \*\*Sacramental Prep is 2 Years (starts in Level 1)\*\*
Level 8 (Conf. 1) \$75.00 includes retreat Level 9 (Conf. 2) \$85 includes retreat (robe fee \$15.00 additional)

Session Selection: Choose a time Circle One & write Class Level on line

Sunday 9:15-10:15am Levels 1,2,3,4,5,6 Level \_\_\_\_\_ Classes begin Sept. 19, 2010
Sunday 11:30-12:30pm Levels 7, 8, 9 Level \_\_\_\_\_ Classes begin Sept. 19, 2010

Disclaimer for pictures to be taken during Religious Education classes and activities. To be used within our Parish Community and/or the Anchor newspaper. Yes \_\_\_\_\_ No \_\_\_\_\_

\*Pictures will be taken of every student within the program for internal use unless otherwise indicated above\*

Parent Signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Please fill in the information for the sacrament(s) your child has received:

Baptism:

Date of Baptism \_\_\_\_/\_\_\_\_/\_\_\_\_ Church \_\_\_\_\_ Location \_\_\_\_\_

First Penance(Reconciliation) \_\_\_\_\_

First Eucharist (Communion):

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Church \_\_\_\_\_ Location \_\_\_\_\_

Contact person in case of emergency \_\_\_\_\_

Relationship to student \_\_\_\_\_ Telephone (\_\_\_\_) \_\_\_\_\_

Office use only: Date: \_\_\_\_\_ Fee: \_\_\_\_\_ Cash: \_\_\_\_\_ Check: \_\_\_\_\_ Amount Paid: \_\_\_\_\_ Initials \_\_\_\_\_

**Medical Information:** Medical Concerns: Yes \_\_\_ No \_\_\_ Describe: \_\_\_\_\_  
Allergies: Yes \_\_\_ No \_\_\_ Describe: \_\_\_\_\_

**Learning Difficulties:** ADD/ADHD \_\_\_ Autism \_\_\_ Reading \_\_\_ Writing \_\_\_ Other \_\_\_\_\_  
Will your child require additional assistance in the classroom? Yes \_\_\_ No \_\_\_  
(Please specify) \_\_\_\_\_

## PARENTS' COMMITMENT TO THE CATHOLIC FAITH AND THE EDUCATION OF THEIR CHILDREN

*Please Initial Each Statement and Sign Below to Complete your Registration*

- ✘ I commit to bring my children up in the Catholic Faith \_\_\_\_\_
- ✘ I commit to bring my children to Holy Mass every weekend and on Holy Days of Obligation \_\_\_\_\_
- ✘ I will promote the Catholic Faith in my household by praying with my children and discussing the Faith \_\_\_\_\_
- ✘ I will use the Budget Envelope System at the parish \_\_\_\_\_
- ✘ I will attend the four adult education classes provided each year \_\_\_\_\_

Parent Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

*If you cannot agree to the five statements above you will need to have an interview with Msgr. O'Connor to discuss your special circumstances and the non-Sacramental option. Please call 508-995-7600 to arrange an appointment.*

This registration should be returned to St. Francis Xavier Religious Education Office  
before **30<sup>th</sup> June 2010** with the associated registration fee.  
The classes have a limited number of places which will be  
allocated on a first-come first-serve basis.