

14th April 2010

Dear Parent,

Congratulations on the decision you have made to continue the formation of your child's religious education by enrolling him/her in the Religious Education Program here at Sacred Heart of Jesus. Classes for all grades of Religious Education on either Wednesday evenings or Thursday evenings, from 6:15 pm until 7:25 pm, and we will have one class of each grade level meeting on each day.

Attached you will find a New Registration form for your child. Please fill it out in its entirety and return it either via US Mail, or by dropping it off in the collection basket at Mass. Please note that classes fill up quickly, and we will do our best to accommodate your schedules – but classes will be assigned on a first-come, first-served basis. Once a class fills (20 maximum), your child will have no other option than to be assigned to the class with fewer students. Tuition for the program is \$60 for one student, or \$110.00 for two students or \$150.00 for three students or more.

Please note that an authentic Baptismal Certificate (with the visible seal present) is required to be on file in our Religious Education office for each child enrolled in our program. Unless it is already on hand in our office, please attach the certificate to your child's registration form.

With prayers for a wonderful spring your family's continued health, we are happy to be

Sincerely yours,

The Reverend Monsignor Francis A. Nave
Pastor

Mrs. Rose Prentice
Director of Religious Education



SACRED HEART OF JESUS PARISH
RELIGIOUS EDUCATION PROGRAM
New Student Enrollment Form – 2010 – 2011 School Year

STUDENT'S FULL NAME: _____ GENDER: M F
PLACE OF BIRTH (CITY, STATE): _____ DATE OF BIRTH: / /
HOME STREET ADDRESS: _____
CITY, STATE, ZIP: _____
HOME TELEPHONE NUMBER: _____ CHECK HERE IF NEW HOME ADDRESS: _____
PARENT'S EMAIL ADDRESS: _____
FATHER'S WORK PHONE: _____ MOTHER'S WORK PHONE: _____
FATHER'S CELL PHONE: _____ MOTHER'S CELL PHONE: _____
EMERGENCY CONTACT: _____ PHONE NUMBER: _____

FATHER'S FULL NAME: _____ RELIGION: _____
MOTHER'S FULL NAME: _____ RELIGION: _____
MOTHER'S MAIDEN NAME: _____
GUARDIAN'S NAME (IF APPLICABLE) _____ RELATIONSHIP TO STUDENT: _____

PARENTS' MARITAL STATUS:
MARRIED DIVORCED REMARRIED WIDOWED SINGLE CHURCH ANNULMENT

WERE PARENTS MARRIED WITHIN THE CATHOLIC CHURCH?
(CIRCLE ONE) YES NO

CHURCH AND LOCATION: _____

CHILD'S SACRAMENTAL INFORMATION

SACRAMENT	DATE	PARISH	LOCATION (CITY AND STATE)
BAPTISM	/ /	_____	_____
FIRST COMMUNION	/ /	_____	_____
CONFIRMATION	/ /	_____	_____

Continued on Reverse Side

SACRED HEART OF JESUS PARISH
 RELIGIOUS EDUCATION PROGRAM
 New Student Enrollment Form – 2009 – 2010 School Year

SCHOOL GRADE IN 2010-2010: _____ SCHOOL NAME: _____ RELIGIOUS ED GRADE 2010-2011 _____

PREVIOUS RELIGIOUS EDUCATION:

RELIGIOUS ED / CCD PARISH AND LOCATION _____ NUMBER YEARS _____

CATHOLIC SCHOOL PARISH AND LOCATION _____ NUMBER YEARS _____

PREFERRED CLASS NIGHT (CIRCLE ONE): WEDNESDAY THURSDAY
 6:15 – 7:30 PM 6:15 – 7:30 PM

USING THE LINES BELOW, PLEASE DETAIL ANY LEARNING DISABILITIES, HEALTH PROBLEMS, SPECIAL NEEDS, AND/OR OTHER IMPORTANT INFORMATION OF WHICH THE RELIGIOUS EDUCATION PROGRAM NEEDS TO BE MADE AWARE.

For Office Use Only:

Date Received: _____

Payment Method: Cash _____ Check _____ Check Number _____ Amount \$ _____

Class Assignment: Wednesday Thursday

Family Registered Parishioners of Sacred Heart? Yes No Envelopes? Yes No

Registration Status Active Inactive

Authentic Baptismal Certificate? Yes No Authentic Confirmation Certificate? N/a Yes No