

St. Bartholomew Parish Religious Education Program 2018-2019 REGISTRATION FORM

Fees:
\$75 per child, \$250 family max (excluding retreat fee). **Families who register prior to June 1st receive a \$10/child discount!**
Additional \$50 retreat fee per 10th grade Confirmation student.
**Confidential financial assistance for Religious Education fee is available, contact the parish for information.*
Online registration available at www.stbartholomew-needham.org/children_and_youth/religious-education/registration

PLEASE PRINT CLEARLY

Family Last Name: _____ Father: _____ Mother: _____

Address: _____ City/Town: _____ Zip Code: _____

Primary Phone: _____ Secondary Phone: _____

Primary Email (required): _____

Secondary Email (optional): _____

Are you a registered parishioner? **YES** or **NO** If "No," would you like a registration form? **YES** or **NO**

If "No," to which parish do you belong? _____

Promotional Release: I consent to the use of any video and/or photographs in which my child may appear by St. Bartholomew Parish. I understand that these materials are being used for promotion of the parish Religious Education programs and/or parish activities, which may include recruitment and fundraising efforts.

Yes _____ No _____

Signature of Parent/ Guardian: _____ Date: _____

Are you available to volunteer with the Religious Education Program? Please circle

Catechist Aide Substitute Retreat Hall Monitor

Baptismal Certificates

After registering this year, we are asking that an original baptismal record with an official seal be submitted for each student. This will help to reduce paperwork for sacramental years. By keeping the certificates on file throughout their formation at St. Bartholomew Parish parents will not have to resubmit them for First Communion and Confirmation. After this year, only students new to the program will be asked to submit a baptismal certificate. No certificate is needed for students baptized at St. Bartholomew. If you have any questions, or need help obtaining an official certificate, please call or email Jen at 781-444-3434 or jfoster@stbartholomew-needham.org

Child #1 (additional children on back):

Last Name: _____ First Name: _____ Goes by _____

Gender: _____ Date of Birth: _____ Last grade attended in Religious Education Program: _____

Name of School (2018-2019 school year): _____ Grade: _____

For 7-10th Grades, Sun. or Mon. nights? (Note: Catholic school Confirmation is only available on Mon.) _____

Received First Eucharist: yes _____ no _____ Received First Penance: yes _____ no _____

Comments or special needs (Allergies, disabilities, medical conditions, etc.)

Church of Baptism: _____ Approx. Date of Baptism: _____

(Register additional children on back)

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Child #2:

Last Name: _____ First Name: _____ Goes by _____

Gender: _____ Date of Birth: _____ Last grade attended in Religious Education Program: _____

Name of School (2018-2019 school year): _____ Grade: _____

For 7-10th Grades, Sun. or Mon. nights? (Note: Catholic school Confirmation is only available on Mon.) _____

Received First Eucharist: yes _____ no _____ Received First Penance: yes _____ no _____

Comments or special needs (Allergies, disabilities, medical conditions, etc.)

Church of Baptism: _____ Approx. Date of Baptism: _____

Child #3:

Last Name: _____ First Name: _____ Goes by _____

Gender: _____ Date of Birth: _____ Last grade attended in Religious Education Program: _____

Name of School (2018-2019 school year): _____ Grade: _____

For 7-10th Grades, Sun. or Mon. nights? (Note: Catholic school Confirmation is only available on Mon.) _____

Received First Eucharist: yes _____ no _____ Received First Penance: yes _____ no _____

Comments or special needs (Allergies, disabilities, medical conditions, etc.)

Church of Baptism: _____ Approx. Date of Baptism: _____

Child #4:

Last Name: _____ First Name: _____ Goes by _____

Gender: _____ Date of Birth: _____ Last grade attended in Religious Education Program: _____

Name of School (2018-2019 school year): _____ Grade: _____

For 7-10th Grades, Sun. or Mon. nights? (Note: Catholic school Confirmation is only available on Mon.) _____

Received First Eucharist: yes _____ no _____ Received First Penance: yes _____ no _____

Comments or special needs (Allergies, disabilities, medical conditions, etc.)

Church of Baptism: _____ Approx. Date of Baptism: _____

<p>For Office Use Only: Date Received: _____ Tuition Paid \$ _____ Check # _____ Initials: _____</p>
