

**St. Paul's Catholic Church, Jacksonville Beach, FL
2020-21 Religious Education Registration**

**Mimi Coleman: Director of Religious Education
(904)249-2660 mimistpaulre@gmail.com**

Please read these directions carefully before completing the Registration form.

- Fill out the form completely – all 4 pages! (Front and Back)
- Please include the family email address that is viewed on a regular basis.
We communicate with our families via email.
- You may register more than one child on this form.
- Return the completed form and registration fee to my office as soon as possible.
You may either mail the form to the church (attn: Mimi Coleman),
or hand deliver to the Parish Office located at the Rectory.

The 2020-21 Religious Education year starts Wednesday, September 16, 2020.

ALL CLASSES WILL BE REMOTE UNTIL FURTHER NOTICE.

**TEXTBOOK & PACKET PICKUP WITH DIRECTIONS FOR OUR REMOTE PLATFORM WILL BE
SEPTEMBER 16. Watch for further instructions via email.**

With the hopes that we will be able to use the school building in the future, and then be able to offer both 'Brick and Mortar' and Remote, we ask you to still identify which of the sessions you would prefer.

Early Session (space is limited)

Kindergarten – 5th Grade: **4:30 – 5:45 PM**

Late Session:

Kindergarten and High School: **6:30 – 7:45 PM**

Registration Fees: Please include fee with registration.

Registration

\$50 one child

\$45 each additional child

Maximum fee of \$150 per family

(St. Paul's provides scholarships for any family that needs assistance. Please speak to Mimi Coleman)

Additional Fees:

First Reconciliation/First Communion Supplemental Fee \$50

RCIA Class for children \$50

Catechists/Volunteers Needed 2020-21

We still have volunteer positions to fill for next year!

If you have not been involved as a catechist before, why don't you give it a try? All lesson plans and materials are provided for you and tuition is waived for your children. Contact the Religious Education Office to see what opportunities are available.

Can't decide what grade to teach? We always need a 'Floater' - a substitute catechist who comes each week and helps wherever the need is. Having a floater at each class time is a tremendous help. Arrival/Dismissal and Front Desk Assistance Volunteers are also needed. If you aren't available every week, but wish to be added to a substitute list, please contact the RE office.

All volunteers must be Safe Environment certified with the Diocese of St. Augustine.

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Family Information

Father's Name: _____
First _____ Last _____ Cell Number _____
Religion _____ Occupation _____

Mother's Name: _____
First _____ Last _____ Cell Number _____
Religion _____ Occupation _____

Mailing Address: _____
Street _____ City/State _____ Zip _____

Address mail to: _____ **Language spoken at home:** _____
(Mr. and Mrs., Ms., Dr. and Mrs., etc.)

Email is our primary source of communication. Please provide a valid email address that is checked regularly.

Primary Email: _____ **Relationship (mother/father):** _____

Add'l Email (if necessary): _____ **Relationship (mother/father):** _____

Marital Status: Married ___ Divorced ___ Separated ___ Single ___ Widow ___
Child/Children live with: () Father () Mother () both () other _____
Does other parent have legal access? () Yes () No

Registered members of St. Paul's Church: () Yes () No If no, parish/church affiliation: _____

Have you previously participated in St. Paul's Religious Education program? () Yes () No

If no, have you been involved with another Religious Ed. or Catholic school program? () Yes () No

Name and location of previous program: _____

Our program relies on parent volunteers.

Please consider volunteering in Religious Education. Parent volunteers are needed in the following areas listed below. No experience necessary...training will be provided.

Catechist: _____ **Catechist Aide:** _____ **Substitute Catechist:** _____ **Office Helper:** _____

Registration/Material Fee Schedule: Payment Due at Time of Registration by check or cash.

\$50 one child \$45 each additional child \$150 maximum registration fee

Additional Materials Fee for Sacraments:

Sacraments of Reconciliation and First Communion: \$50
RCIA class for children \$50

Fees Due: Registration: _____ Additional: _____ Total: _____

Office Use Only:

Date: _____ Total Due: _____ Total Paid: _____

Cash or Check: _____

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Student Information

Session preferences are: Early Session: Grades K-5: 4:30 – 5:45 Late Session: Grades K-8: 6:30 – 7:45

**If your child is in 3rd grade or higher and has not been Baptized and/or has not received (Penance) and/or Eucharist (Holy Communion) please speak directly to the DRE.*

**If your child was not baptized in the Catholic Church, please note in which faith they received their baptism.*

**Children not baptized at St. Paul's, must have a Baptism Certificate on file with the Religious Education Office.*

Child 1

Name: (First) _____ (Last) _____ Date of Birth: _____

Gender: _____ Grade in 2020-21: _____ Session Request (Early or Late): _____

Sacraments for this Child:

Baptism: Yes/No Place: _____ Reconciliation: Yes/No Place: _____

First Communion: Yes/No Place: _____ Confirmation: Yes/No Place: _____

Medical Information: *Please provide the following information so that we may better meet the needs of your child.*

CHRONIC ILLNESS	LEARNING DISABILITIES (Be Specific)	ALLERGIES	DAILY MEDICATION	OTHER

Child 2

Child's Name: (First) _____ (Last) _____ Date of Birth: _____

Gender: _____ Grade in 2020-21: _____ Session Request (Early or Late): _____

Sacraments for this Student:

Baptism: Yes/No Place: _____ Reconciliation: Yes/No Place: _____

First Communion: Yes/No Place: _____ Confirmation: Yes/No Place: _____

Medical Information: *Please provide the following information so that we may better meet the needs of your child.*

CHRONIC ILLNESS	LEARNING DISABILITIES (Be Specific)	ALLERGIES	DAILY MEDICATION	OTHER

Child 3

Child's Name: (First) _____ (Last) _____ Date of Birth: _____

Gender: _____ Grade in 2020-21: _____ Session Request (Early or Late): _____

Sacraments for this Student:

Baptism: Yes/No Place: _____ Reconciliation: Yes/No Place: _____

First Communion: Yes/No Place: _____ Confirmation: Yes/No Place: _____

Medical Information: *Please provide the following information so that we may better meet the needs of your child.*

CHRONIC ILLNESS	LEARNING DISABILITIES (Be Specific)	ALLERGIES	DAILY MEDICATION	OTHER

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Child 4

Child's Name: (First) _____ (Last) _____ Date of Birth: _____

Gender: _____ Grade in 2020-21: _____ Session Request (Early or Late): _____

Sacraments for this Student:

Baptism: _____ Yes/No Place: _____ Reconciliation: _____ Yes/No Place: _____

First Communion: _____ Yes/No Place: _____ Confirmation: _____ Yes/No Place: _____

Medical Information: *Please provide the following information so that we may better meet the needs of your child.*

CHRONIC ILLNESS	LEARNING DISABILITIES (Be Specific)	ALLERGIES	DAILY MEDICATION	OTHER



Emergency Contact Information

In the event of an emergency, we will make every effort to first contact the parent. In the event a parent cannot be reached, please provide an alternate contact name:

Alternate Emergency Name _____ Telephone Number _____

Emergency Medical Authorization

As a parent and/or guardian, I authorize the treatment of my minor child/children by a qualified and licensed medical doctor in the event of a medical emergency, which, in the opinion of the attending physician, may endanger his or her life, cause physical disability or undue discomfort if delayed. This consent is granted only after a reasonable effort has been made to reach me

Parent/Guardian Signature: _____ Date: _____

Please note:

*The staff and/or volunteers of St. Paul's Religious Education Office **do not** dispense pills such as aspirin or Benadryl etc. Additionally, the Staff and volunteers **do not** administer any shots such as insulin or an epi pen, etc. If you feel your child needs these health items during class time, one of the parents will need to be present to administer them. Please contact the Director of Religious Education for the Volunteer paperwork.*

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Student Dismissal

St. Paul's Religious Education takes the safety of our students very seriously.

All students will be dismissed to a guardian at the end of each class meeting. Students will be dismissed from assigned classrooms. Parents or Authorized persons must have prior permission for child's release. All authorized persons must have a valid driver's license.

I understand that my child is to be picked up from an assigned classroom at the end of each session. If my child is to be picked up by someone other than the person signing this form, I will list their name below. This form will authorize that person(s) to pick up my child. I understand that it is the parent's responsibility to ensure carpool members have authorized family permission.

Parent/Guardian Signature: _____ Date: _____

My Child may be picked up by the following people: Please **PRINT** authorized adults (**First and Last Names**) and their phone numbers:

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____

Name: _____ Phone Number: _____



Child Photography Release

St. Paul's Catholic Church, Religious Education Office in Jacksonville Beach, FL will not release or use any photograph or image of your child/children without prior written consent from you as the parent or guardian. Images may be used for: parish website, parish bulletin, newsletters, and parish PowerPoint presentations.

Please check ONE of the following choices, then list your child/children attending Religious Education.

_____ **I/We GRANT** permission for the photo/image that includes our child/children without any personal identifier (no name, no age or grade, no address, just as a member of this church) to be published on the church's or diocese's public internet site, in publications of the church or diocese, and/or in other media that may publicize church events

_____ **I/We DO NOT GRANT** permission for the photo/image that includes our child/children to be published on the church's or diocese's public internet site, in publications of the church or diocese, and/or in other media that may publicize church events.

Parent/Guardian Signature: _____ Date: _____