

St. John the Evangelist Religious Education Family Registration Form 2011–2012

Phone: 540-347-2922 ext. 209

Revised: 8/6/2011

Dear Parents,

Please make every effort to review the classroom expectations and dress code for Religious Ed. Please print your name and sign below so that your RE Registration Form can be processed. We thank you in advance for your cooperation in this matter.

Expectations for Religious Ed Families

1. Anyone with an outstanding balance will have to pay that balance before this year's registration form will be accepted.
2. No class changes will be made after the first two weeks of class, unless it's an emergency. We do not consider sports schedules to be an emergency.
3. Attend Mass every Sunday (Sat. night) and Holy Day of Obligation.
4. Parents (or a responsible adult) must bring their child to the classroom and then sign-out their child every week from class. This requires walking into the building.
5. Parents should make every effort to ensure that their child arrives on time and so does not disrupt the class after it begins.
6. Parents will be on time to pick up their child after the classes are completed. Our RE volunteers cannot stay for an extended time.
7. RCIC is a class for those children becoming Catholic and/or those children grades 4 and up that need Penance and First Communion and possibly Baptism / Confirmation. The Parents of children in RCIC are required to attend meetings and retreats that will be scheduled during the year.
8. Raise your hand before you speak.
9. Do not "talk" during class unless the teacher has given permission.
10. Follow the dress code.
11. Listen and participate in class.
12. Keep their hands and feet to themselves.
13. Be kind to all.
14. Be obedient and respectful to your teachers and assistants.
15. Complete your assignments each week.
16. As we are fortunate to share the school facilities with others, we will be considerate of others (especially those with food allergies) and not allow food or drinks in the classrooms. The only exceptions will be for Christmas and End of Year parties and then we will make every effort to allow only non allergy foods.
17. Only registered RE students should attend class. Friends and relatives of students should not attend class without written permission from their teachers and a waiver from those friend's parents.
18. Do not bring a cell phone to class. If a student brings a cell phone to class the teacher will keep it on the table in the front of the room until class is over.
19. Students who miss more than 5 days of Religious Ed will have to be evaluated to see if they are able to move up to the next grade/and if they are properly prepared to receive a sacrament.

Dress Code for Students: Students should be dressed appropriately for class.

1. No t-shirts with inappropriate pictures or words are to be worn.
2. Pants and shorts must be worn at the waist and no boxer shorts should be visible.
3. No spaghetti strap shirts (camis) unless a shirt or sweater is worn over it.
4. No mini-skirts or short-shorts.
5. Pants and skirts are preferred over sweats and shorts.

*Please note that if your child is disruptive during class every effort will be made to assist them in practicing self-control. However, St. John's Religious Education reserves the right to dis-enroll students if behavior is unacceptable.

I, _____ (name of parent), agree to the procedures and expectations listed above. I agree to follow the procedures and expectations listed above in order to participate in the St. John's Religious Education Program.

Parent Signature: _____ Date: _____

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IMPORTANT!!! Visit our website at www.stjohntheevangelist.org for all Religious Ed policies and info needed during the year.

- Your family **must be registered** with St. John the Evangelist Parish to attend Religious Education classes.
- Please fill out this **entire form** (front / back) and **ensure that all info is correct!** Email is the primary mode of communication for RE.
- Class assignments are made on a first come, first placed basis *in regards to your first choice*.
- Mail this **fully completed form with complete payment** to: St. John the Evangelist RE, 271 Winchester Street, Warrenton, VA 20186
- Make checks payable to **St. John the Evangelist Catholic Church**. Payment Plans are available – please call the RE office for info.
- NOTE: If any of your children were baptized outside of this parish, and you **have not** already supplied us with a copy of each child's **baptismal record, you will need to supply a copy for our files.**
- Classes will begin **August 28th/29th/30th**. The 2011-2012 RE Calendar will be posted on the RE webpage as soon as it is available in Aug.
- Would you like to share your faith or volunteer? Please see below.
- RCIC is a class for those children becoming Catholic and/or those children grades 4 and up that need Penance and First Communion and possibly Baptism / Confirmation. The Parents of children in RCIC are required to attend a couple of meetings that will be scheduled during their child's class time throughout the year.
- **No class changes** will be made after the first two weeks of class, unless it's an emergency. We do not consider sports schedules to be an emergency.

Fee Schedule: *Sacramental* means your child is receiving First Communion, First Penance or Confirmation this year. Please contact the Religious Education Office in case of financial hardship. These fees are determined by when these registration forms are received by the RE Office:

Regular Fee B: Before August 1st: Non-Sacramental: \$85.00 Sacramental: \$110.00 Family Maximum: \$275.00
Late Fee C: August 1st & later: Non-Sacramental: \$100.00 Sacramental: \$130.00 Family Maximum: \$325.00
High School: \$50.00

***Newly registered families of St. John the Evangelist Parish will pay Fee B even if registering after August 1st.**

Class Offerings: Please select your 1st, 2nd, 3rd, & 4th choice from the sessions below. **All 4 must be filled in for registration.**

Sunday Session A (K-8th): 9:15 am – 10:30 am **FULL** Monday Session C (K-8th, High School): 5pm–6:15pm **Grades K and 3 Only** _____
Sunday Session B (K-8th, RCIC): 11 am–12:15 pm **Grades K, 3 & RCIC Only** _____ Tuesday Session D (K-8th): 5:00 pm – 6:15 pm _____

Volunteer Ministries in Religious Education:

Teachers and Assistants receive preferences on class assignments as well as free tuition for their children. **Assistants are expected to substitute for the teacher when needed. Teachers and Assistants must submit the signed Oath of Fidelity to the Church.** This document is available on the RE web-page. **Teachers and Assistants must first complete the required paperwork for background checks and then become VIRTUS trained within 180 days of volunteering. New Catechists and Assistants are required to attend a training session** – on Saturday, 8/20/11 (12pm – 2pm) in the St. John's School's Science Room. **All Catechists and Assistants are required to attend one of two RE Volunteer meetings:** Monday, 8/15/11 (6:30pm – 8:30pm) or Saturday, 8/20/11 (10am – 12pm) in the St. John's School's Science Room. **Please check the areas of interest:**

Teacher _____ Assistant Teacher _____ Other _____

Grade Preference for teaching/assisting: _____ Session you prefer to teach: _____

Name: _____ Home Phone: _____

Email: _____ Cell Phone: _____

Medical Insurance Information:

Company Name: _____

Insurance Company Phone: _____

Address: _____

Policy #: _____

Parent: I, _____, in consideration of the benefits derived, and in view of the fact that St. John the Evangelist Catholic Church is a religious institution, membership in which is voluntary, I hereby agree to the participation of my child (children) in the activity of religious education classes.

In the event I cannot be reached, I hereby grant permission for my son (s) and/or daughter (s) to be evaluated, diagnosed, treated and or medicated in accordance with the standard medical practice by licensed medical personnel. In the event that a medical emergency occurs with my child, I grant permission to a St. John the Evangelist leader to ensure emergency medical treatment for my child (children) if I cannot be contacted. I relieve St. John the Evangelist Parish, its agents and the Diocese of Arlington of all responsibility and consequences that may arise as a result of the emergency treatment or administration of minor medications. Furthermore, I agree to accept all responsibility as a result of scheduling such treatment.

My child/children agree(s) to abide by all the rules and regulations. I understand that St. John the Evangelist Parish, its agents, and the Diocese of Arlington will not be held liable if my child fails to cooperate with the rule and safety measures.

Signed _____

Date: _____

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Last Name Registered with Parish _____ Parish Envelope Number **You Are Using:** _____

Mailing Address: _____ Home Phone: _____

_____ Family Email: _____

Father's Name: _____ Cell # _____ Father's Religion: _____

Mother's Name: _____ Cell # _____ Mother's Religion: _____

Custodial Parent, if different from above: _____ Phone: _____

Emergency Contact: _____ Phone: _____

NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

Child _____ Age _____ Birth Date ____/____/____ Sex _____ Grade in 2011-12 _____ Grade/Session in 2010-11 or last RE attended ____/____

Sacrament, Date and Parish Baptism *Catholic?* Eucharist Penance Confirmation
 _____ _____ _____ _____ _____ _____

Received: _____

School Child Attends: _____

Special Needs: (e.g. medical, learning disabilities, physical disabilities): _____

Child _____ Age _____ Birth Date ____/____/____ Sex _____ Grade in 2011-12 _____ Grade/Session in 2010-11 or last RE attended ____/____

Sacrament, Date and Parish Baptism *Catholic?* Eucharist Penance Confirmation
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Sacrament, Date and Parish Baptism *Catholic?* Eucharist Penance Confirmation
 _____ _____ _____ _____ _____ _____

Received: _____

School Child Attends: _____

Special Needs: (e.g. medical, learning disabilities, physical disabilities): _____

For Office Use Only: Tuition due: \$ _____ Tuition Pd: \$ _____ Chk# _____ Date Paid: ____/____/____