

HOLY CROSS RELIGIOUS EDUCATION PROGRAM
LITTLE CHURCH through CONFIRMATION

FAMILY NAME REGISTERED UNDER IN PARISH

2008- 2009 RE-REGISTRATION FORM
FAMILY INFORMATION

PHONE NUMBER: Home _____ Ask for _____
PHONE NUMBER: Daytime: _____ Ask for _____

ADDRESS _____
Number and Street City/State Zip Code

PARENTS' E-MAIL ADDRESS _____ CHILD(REN)'S E-MAIL ADDRESS _____

FATHER'S NAME _____ RELIGION _____
First Last

MOTHER'S NAME _____ RELIGION _____
First MAIDEN Last

MARITAL STATUS OF PARENTS (Please circle one): Married Single Widow/er Separated Divorced

If remarried, who is step-parent? _____ Religion _____

If divorced, who has primary custody? _____ Religion _____

Is there a custody order in effect? Details of order _____

Non-custodial parent's address (if you want information mailed) _____

DOES YOUR CHILD HAVE ANY PHYSICAL, EMOTIONAL OR SPECIAL EDUCATIONAL NEEDS? OR ON MEDICATION FOR CHRONIC PROBLEMS SUCH AS ASTHMA, ATTENTION DEFICIT, ETC.? _____ YES _____ NO

If yes, please explain (child's name and need) _____

It is essential that we make teachers aware of limitations. This information is confidential and given only to the child's teacher

IF YOUR CHILD IS IN ANY TYPE OF SPECIAL EDUCATION PROGRAM, PLEASE NOTE THE TYPE AND WHERE: _____

DO YOU HAVE ANY OTHER CONCERNS THAT NEED TO BE ADDRESSED, SUCH AS A LOSS OR TRAUMA? _____ YES _____ NO

If yes, please explain (child's name and need) _____

STUDENT INFORMATION: PRE-K through LEVEL 6

Please use the list of programs below when filling in the individual lower level student selections. **Before you choose a program, consider other family obligations, i.e., school, sports, music, community, work, custody arrangements, etc.**

LOWER LEVEL PROGRAM INFORMATION

1. Wednesday Afternoon Program - 4:30 pm to 6:00 pm - on campus in Elementary School - levels 1, 2, 3, 4, 5, 6
2. Wednesday Evening Program - 6:30 pm to 8:00 pm - on campus in Elementary School - levels 1, 2, 3, 4, 5, 6
3. Thursday Evening Program - 5:30 pm to 7:00 pm - on campus in Elementary School - levels 1, 2, 3, 4, 5, 6
4. Little Church Program - usually 1st Sunday of the month - 10:30 am in auditorium for 4 and 5 year olds **and parents**
5. Summer CCD Program – June 15 – 26, 2009 (excluding weekends); concentrated 30 hour program; 9 am – 12 noon; Levels K, 1, 3, 4, 5, 6

<u>Student's Full Name</u>	<u>Age</u>	<u>Name of School & Grade</u>	<u>Special Education Program (if applicable)</u>	<u>CCD Program and Level in CCD (indicate # from above)</u>
1. _____				
2. _____				
3. _____				
4. _____				

TIME AND TALENT (Please check one before returning registration for processing. If you have children in both programs, you are expected to only help in one.)
I would like to support the Religious Education Program this school year by:

<input type="checkbox"/> Assistant in the classroom during my child's session+*^ <input type="checkbox"/> Teacher in classroom during my child's session+*^	<input type="checkbox"/> Parking lot monitor during my child's session+*^ <input type="checkbox"/> Substitute teacher during my child's session*^
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PLEASE NOTE: + These areas are ones requiring a real time commitment ^ Not needed for Little Church program.
*A background check is needed to volunteer. The Religious Education Office will provide form and pay for background check.

All CCD registrations are due in the Religious Education Office by Labor Day of the current CCD year or a late fee may be assessed.

THANK YOU!!!

STUDENT INFORMATION - JUNIOR HIGH through CONFIRMATION

Please use the list of programs below when filling in the individual upper level student selections.

UPPER LEVEL INFORMATION

1. Junior High Neighborhood Program - day and time determined by host and group
2. Confirmation Neighborhood Program - day and time determined by host and group

<u>Student's Full Name</u>	<u>Age</u>	<u>Name of School & Grade</u>	<u>Special Education Program (if applicable)</u>	<u>CCD Program and Level in CCD</u>	<u>Play Musical Instr. - kind?</u>
1. _____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____

TIME AND TALENT (Please check one before returning registration for processing. If you have children in both programs, you are expected to only help in one.)
I would like to support the Religious Education Program this school year by:

- | | |
|--|---|
| _____ Assisting in a junior high group* | _____ Teaching a Confirmation group* |
| _____ Teaching a junior high group* | _____ Hosting a Confirmation group in my home* |
| _____ Hosting a junior high group in my home* | _____ Assisting in a Confirmation group* |
| _____ Going on a men's or women's Confirmation retreat as a facilitator* | _____ Working on the prep or follow up activities for Confirmation retreat* |
| _____ Helping with social and service events for junior high and Confirmation* | |

***A background check is necessary to volunteer.** Religious Education Office will provide form and pay for background check.

THANK YOU!!!

FOR OFFICE USE ONLY

Date Registration Received _____ Review (Date) _____ Other Information _____
 Γ Deposit: Cash _____ Check # _____ Deposit Amount _____

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THANK YOU!!!