|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***ST. VINCENT DE PAUL CATHOLIC CHURCH*** | | | | |
| ***RELIGIOUS EDUCATION REGISTRATION*** | | | | |
| **C:\Users\Admin Group\Desktop\Nancy's Files\church.png** | | | | |
| ***ONE CHILD PER REGISTRATION SHEET – Payment is requested at registration*** | | | | |
| Child’s Full Name: Click here to enter text. | | | Today’s Date: Date | |
| Street Address: Click here to enter text. | | | | |
| City: City State: State Zip: Zip | | | | |
| Birthday: \_\_\_\_\_\_\_ | Age: \_\_\_\_ | Grade: \_\_\_\_ | Registered member of SVDP?    ***Note: Parish Registration is required for participation in the SVDP RE Program.*** |
| Did child attend RE last year?  If yes, where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_  Was child Baptized at SVdP?  If yes, when? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| As a Catholic, Holy Mass attendance is required every weekend and on Holy Days of Obligation.    Normal Mass You Attend (day/time): Click here to enter text. | | | Sacraments RECEIVED: |
| Will your child be receiving either First Holy Communion or Confirmation this year at SVdP?  ***If your child will receive First Holy Communion this year AND your child was not Baptized at SVdP, then you will need to submit a copy of his/her Baptismal Certificate.***  ***If your child will receive the sacrament of Confirmation this year AND your child was not Baptized at SVdP, then you will need to submit a copy of his/her Baptismal Certificate AND First Holy Communion Certificate or obtain a Certificate of Baptism with notations from the parish of Baptism.*** | | | |
| Allergies: Click here to enter text. | | | |
| Special Needs or Comments: Click here to enter text.  ***Note: A parent or family member may be asked to attend class along with the child to provide additional assistance.*** | | | |

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Person Registering *if other than parent*: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | Relation to Child: \_\_\_\_\_\_\_\_ |
| Father’s Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Father’s Email Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Father’s Phone:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Father’s Address (*if different from child*): Click here to enter text. | | | |
| Mother’s Name:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Mother’s Email Address:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Mother’s Phone:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Mother’s Address (*if different from child*): Click here to enter text. | | | |
| Emergency Contact if above cannot be reached: Name / Phone: Click here to enter text. | | | |
| I give permission for my child to participate in the VIRTUS *Protecting God’s Children* safety training for the prevention of child abuse. | | | |
| I would like to volunteer as a teacher, room assistant, or substitute. VIRTUS training and background checks are required. Volunteers will receive a 50% discount on Tuition. If so, please indicate your preferred age group: | | | |
| *(office use only)* R.E. Placement: Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Teacher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |

|  |  |
| --- | --- |
| **YEARLY REGISTRATION FEES:** | |
| ***25% is due at the time of registration with the remainder to be paid before class begins.*** | |
| **EARLY BIRD DISCOUNT APPLIES IF PAID IN FULL BEFORE AUGUST 5** | |
|  | |
| * **1 child $125 – early bird $100 (paid in full before August 5)** * **2 children $200 – early bird $175 (paid in full before August 5)** * **3 or more children $275 – early bird $225 (paid in full before August 5)** * **Post Confirmation – no fee at attend** * **First and Second Year Confirmation – additional $50 mandatory retreat fee** | |
| Initial here. | **If your child is given a take home book, it is expected to be returned at the end of the year. If textbook is not returned, you will be assessed a fee of $20. (Not applicable to Confirmation workbooks.)** |

# All In-class meetings will be held on sunday Mornings FROM 10:30 – 11:45 a.m.

# (Sunday Holy Mass is at 9:00 a.m. and 12 noon. Please refer to RE calendar for class dates.)

**Class Class Descriptions\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Kindergarten Introduction to the Faith

1st Grade First Year First Holy Communion Preparation

2nd Grade Second Year First Holy Communion Preparation

3rd -8th GradesReceivedFirst Holy Communion

3rd -8th Grades Sacrament Preparation In need of Baptism and/or First Holy Communion

9th Grade First Year Confirmation Preparation

10th Grade Second Year Confirmation Preparation

11th-12th Grade Confirmed, Bible Study and Topics on the Catholic Faith

**ATTENDANCE POLICY**

# The Archdiocese of Atlanta requires a 90% attendance rate for Religious Education classes.

# TO RECEIVE First Holy Communion:

# MUST attend 24 out of the 26 scheduled classes for 1st and 2nd year sacrament preparation

* Complete all extra activities such as retreats
* Understand basic concepts and principles of the Catholic Faith as required

# Actively participate in weekly Holy Mass and parish life (sign in sheet required)

# TO RECEIVE Confirmation in 10th grade:

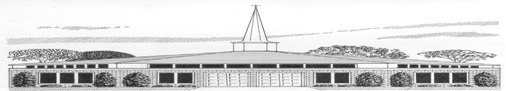
# MUST attend 24 out of the 26 scheduled classes for 1st and 2nd year sacrament preparation

* Complete all extra activities such as retreats and saint report
* Complete 25 service hours

# Actively participate in weekly Holy Mass and parish life (sign in sheet required)

* Complete personal interview with Pastor
* Have a solid knowledge of Catholic Faith and conviction to claim the faith as yours for life.
* A 9th grader with no recent formal religious formation will be evaluated for proper class placement.

|  |  |
| --- | --- |
| I have read and agree to the PAYMENT POLICY and the ATTENDANCE POLICY. | SIGNATURE REQUIRED - By inserting your name here you agree to the Payment and Attendance Policy. |

[](https://archatl.com/) 

St. Vincent de Paul Catholic Church, Dallas, GA

Assumption of the Risk Relating to COVID-19

Complete One Form per Child

|  |  |
| --- | --- |
| Child’s Name: Click here to enter text. | Date: Date |

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is extremely contagious and is believed to spread mainly from person to person through respiratory droplets when an infected individual coughs, sneezes or speaks. As a result, government agencies at all levels and federal, state and local health agencies recommend social distancing and have placed limits on the congregation of groups of individuals. The parish of St. Vincent de Paul Catholic Church has put preventative measures in place to reduce the spread of COVID-19; however, the parish cannot guarantee that you or your child(ren) will not become infected with COVID-19. Further, attending activities on the campus of St. Vincent de Paul could increase your risk and that of your children for contracting COVID-19. While St. Vincent de Paul will make all reasonable efforts to lower the risk of COVID-19 exposure and spread at the parish, the parish is unable to provide any guarantee that students or their families will not be exposed to or infected by COVID-19. By enrolling your child(ren) in and attending parish faith formation, you acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that you, your child(ren) and or other family members may be exposed to or infected by COVID-19. It is expected that students and other family members will follow the preventative measures and guidelines implemented by St. Vincent de Paul including not coming to the parish premises if demonstrating any signs or symptoms of COVID-19.

|  |  |
| --- | --- |
| I have read and agree to the terms of the COVID-19 WAIVER. | SIGNATURE REQUIRED – By inserting your name here, you agree to the terms as stated above. |

FOR OFFICE USE ONLY: This form is to be kept with the registration forms