

St Ronald Religious Formation
17701 Fifteen Mile Road
Clinton Township, MI 48035
586-792-1276
kjacob.stronald@gmail.com

Dear Parent(s),

Welcome to St Ronald's Religious Formation Program. Please find a registration form attached for the 2019-2020 school year. Be sure to fill out all forms that are attached, including the Medical Release Form and the Video/Photography Release Form. These forms are mandated by the Archdiocese of Detroit and must be completed in their entirety. I need one registration form per family and I need a medical release form and video form for each child registered in the program. *An emergency contact must be someone who does not live in your house.*

Classes for grades 1-6 will be held on Tuesdays at 4:30-5:45 PM and at 6:30-7:45 PM. You will have to choose which time is best for your family. **Grades 7 and 8** will meet on the second Friday of each month and on the fourth Sunday of each month. We will honor requests in the order in which they are received. For grades 1-6 we will not go over 15 students in a class, so it would behoove you to get your registration in as soon as possible. Once a 4:30 class is full, you will be placed in the 6:30 class and vice-versa. If either time works for your family, please let us know that as well, so that we can accommodate other families that need a specific time.

The tuition cost will be the same as it has been in recent years: 1 child \$90.00, 2 children \$170.00, 3 or more children \$225.00. All tuition is due by the first day of class unless other payment arrangements are made with me. **A \$25.00 late fee** will be applied to an account if your registration form is received after September 1st. No child will be left out because of monetary issues, please come talk to me.

A class schedule will be given to you on the first day of class in the fall. The first night of class for grades 1-6 will be Tuesday, September 24, 2019. As always, please contact me if you have any questions or concerns.

Sincerely,

Kimberly Jacob
Parish Catechetical Leader/ Youth Minister

St. Ronald Religious Formation Registration

Family Last Name: _____

Father's Name: _____

Father's Religion: _____

Mother's Name: _____

Mother's Religion: _____

Primary Telephone Number: _____

1st Child's Name: _____ Grade: _____ 4:30PM or 6:30PM session
Birthdate: _____ Gender: _____ Parish Where Child was Baptized: _____

2nd Child's Name: _____ Grade: _____ 4:30PM or 6:30 PM session
Birthdate: _____ Gender: _____ Parish Where Child was Baptized: _____

3rd Child's Name: _____ Grade: _____ 4:30 PM or 6:30 PM session
Birthdate: _____ Gender: _____ Parish Where Child was Baptized: _____

** If your child was baptized at a parish other than St. Ronald, we will need a copy of the Baptismal Certificate.

*** Friendly reminder- your child is not fully registered until I receive all necessary forms.

Office use only:

Paid-\$: _____ Cash or Check #: _____