

2018-2019 Student Registration Form
San Juan del Rio Catholic Church –
Religious Education Program

For Office Use Only

Date Received: _____

Check #: _____

Amount: _____

Assessment Test:

Date Given: _____

Date Received: _____

Registered Parishioner of SJDR? Yes or No

Family Name: _____

Father Name: _____ Mother Name:

_____ Maiden Name: _____

Marital Status: Married Single Separated Divorced Widowed

Child Custody: Father ____ Mother ____ Both ____ Legal Guardian ____ (documentation required)

Contact Information: **SMS text messaging is for emergency purposes only. You must have authorized SMS text messaging with your cell phone carrier. Your cell phone carrier may charge you a for this service**

Home Phone: ____/____ - _____

Father Cell: ____/____ - _____ Authorize SMS Text Messaging (Carrier _____)

Father Work: ____/____ - _____

Father Email Address: _____

Mother Cell: ____/____ - _____ Authorize SMS Text Messaging (Carrier _____)

Mother Work: ____/____ - _____

Mother Email Address: _____

Home Address: _____

Emergency Contact: List an **additional adult** contact in the event the parent/guardian is not available

Name: _____

Home Phone: ____/____ - _____ Cell Phone: ____/____ - _____

*****We require proof of Baptism and, if applicable, First Communion for all registered students. Please provide these important documents with your registration, if your family is new to our program or you haven't done so already. If you are unsure, please contact the Religious Education office for verification.*****

Student Information:

Homeschool: Yes or No

1st Child Name: _____ M / F _____ Date of Birth: _____ Grade _____

Attended SJDR last year: Yes or No If not, where: _____

Sacraments Received: Baptism _____ Reconciliation _____ First Communion _____ Confirmation _____

2nd Child Name: _____ M / F _____ Date of Birth: _____ Grade _____

Attended SJDR last year: Yes or No If not, where: _____

Sacraments Received: Baptism _____ Reconciliation _____ First Communion _____ Confirmation _____

3rd Child Name: _____ M / F _____ Date of Birth: _____ Grade _____

Attended SJDR last year: Yes or No If not, where: _____

Sacraments Received: Baptism _____ Reconciliation _____ First Communion _____ Confirmation _____

(If more children, please attach an addition registration form)

Medical Needs:

Child's Name	Medical Condition, Allergies, Special Needs, etc.	Parent Instructions for the Catechist

Choice of Sessions: Please circle your 1st, 2nd, and 3rd choices. Marking only one choice will not guarantee assignment to that class session. **Classes are subject to cancellation, if catechists are not available to teach the class.**

Choice	Class Session	Time	Classes for
1 2 3	Sunday	3:15 - 4:45 PM	Grades K thru 8 (Confirmation)
1 2 3	Wednesday Early	4:15 - 5:45 PM	Grades K thru Grade 8 (Confirmation)
1 2 3	Wednesday Late	6:15 – 7:45 PM	Grades 1 thru HS (Confirmation)

All children in the family will be assigned to the same class session unless we are advised otherwise.

Receiving the sacrament of 1st Communion and Confirmation in the Diocese of St. Augustine requires 2 consecutive years of preparation. Please list children who you expect to receive a sacrament in the 2018-2019 school year. Any child new to the SJDR Religious Education program, but you expect to receive a sacrament this year, please know that we require written documentation from your previous parish of the child's satisfactory completion of their 1st year preparation for the sacrament.

Child Name: _____ Sacrament: 1st Communion ____ Confirmation ____

Child Name: _____ Sacrament: 1st Communion ____ Confirmation ____

Fee Information: The fees below reflect the quality program that we offer, however the religious education of your child(ren) is our primary concern and is not meant to prohibit anyone from attending our program. Financial accommodations are available. Please contact the Religious Education office at (904) 287-2801 for more information.

	Parisioner Rate	Non-Parishioner Rate
1 st Child	\$125	\$225
2 nd Child	\$ 75	\$125
3 or more (family max.)	\$275	\$475
Late Fee (after August 1)	\$ 50	
Sacramental Prep Fee	\$ 25 (per child receiving a sacrament)	\$ 25 (per child receiving a sacrament)

Sharing Your Time & Talent: *(Adults Only – Tuition Waivers may be available)*

Volunteer Name	I am interested in becoming – Check (v) all that apply
	Primary Catechist ____ (previous teaching experience: Yes or No)
	Assistant Catechist ____ (previous teaching experience: Yes or No)
	Substitute Catechist ____ (previous teaching experience: Yes or No)
	Office Volunteer ____ (times/days available: _____)
	Gate Security ____
	Sac. Prep Volunteer ____ (assist with First Communion/Confirmation Receptions)

PLEASE NOTE: New this year is a requirement for all parents who have a child in a sacrament preparation class this year (1st & 2nd Grade, 7th & 8th Grade, & Bridges Year 1 & 2 families) to complete a minimum of 10 hours of service to the parish. Please see the Parent-Student Handbook for details.

Photograph Release:

By signing below, I (we) hereby assign and grant to San Juan del Rio Religious Education Program the right and permission to use and publish the photographs/film/videotapes/electronic and/or sound recordings made of me or my child by the San Juan del Rio Religious Education Program and hereby release San Juan del Rio Catholic Church from any and all liability from such use and publication. I (we) hereby authorize the reproduction, copyright exhibit, broadcast, electronic storage, and/or distribution of the above listed items without limitation at the discretion of San Juan del Rio Catholic Church, and I (we) specifically waive the right to any compensation (we) may have for any of the forgoing.

By signing below, I (we) certify that I (we) have read the policies provided in the **2018-2019 Parent-Student Handbook** for the Religious Education Program and agree to comply with its policies.

Parent/Guardian Printed Name: _____

Signature: _____

Parent/Guardian Printed Name: _____

Signature: _____