



**PLEASE PRINT CLEARLY**

**PLEASE COMPLETE BOTH SIDES OF FORM**

**REGISTRATION FOR GRADED RELIGIOUS EDUCATION**

<b>Family Name</b> _____	<b>Home Phone</b> _____
<b>Mother's Full Name</b> _____	<b>Cell Phone</b> _____
<b>Address</b> _____	<b>Email</b> _____
<b>City/Zip Code</b> _____	<b>Subdivision</b> _____
<b>Father's Full Name</b> _____	<b>Cell Phone</b> _____
<b>Address</b> _____	<b>Email</b> _____
<b>City/Zip Code</b> _____	<b>Subdivision</b> _____
<b>Preferred family email</b> _____	<b>Preferred family phone</b> _____

**VOLUNTEERS : WE NEED YOUR HELP !**

**NAME** \_\_\_\_\_

**EMAIL** \_\_\_\_\_

**CATECHIST** \_\_\_\_\_ **CATECHIST AIDE** \_\_\_\_\_

**SPECIAL EVENTS** \_\_\_\_\_ **HALL MONITORS** \_\_\_\_\_ **Other** \_\_\_\_\_

ALL VOLUNTEERS MUST SUBMIT TO A BACKGROUND SCREENING AND COMPLETE THE SAFE HAVEN CERTIFICATION AS REQUIRED BY THE DIOCESE. PLEASE CONTACT LOUISE HENESY. THANK YOU

**2021-2022**

**EMERGENCY CONTACT FORM PLEASE COMPLETE THIS FORM**

**CHILD'S NAME(S)** \_\_\_\_\_ **GRADE(S)** \_\_\_\_\_

**MOTHER'S NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**FATHER'S NAME** \_\_\_\_\_ **PHONE** \_\_\_\_\_

**EMERGENCY CONTACT #1** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**EMERGENCY CONTACT #2** \_\_\_\_\_

**PHONE** \_\_\_\_\_

**EMERGENCY MEDICAL CONTACT** \_\_\_\_\_

**PHONE** \_\_\_\_\_

\_\_\_\_\_ has permission to pick my child up from Religious Education if I am not available.

parent signature \_\_\_\_\_

**PLEASE INDICATE YOUR 1ST AND 2ND CLASS PREFERENCE DAY AND TIME FOLLOWING YOUR CHILD'S INFORMATION (PLEASE INDICATE NEXT YEAR'S SCHOOL GRADE 2021-2022)**

CHILD'S FULL NAME	GRADE/SCHOOL	DATE OF BIRTH	SAC. YEAR	
1. _____	_____	_____	YES	NO
1st class choice _____	2nd class choice _____			
2. _____	_____	_____	YES	NO
1st class choice _____	2nd class choice _____			
3. _____	_____	_____	YES	NO
1st class choice _____	2nd class choice _____			
4. _____	_____	_____	YES	NO
1st class choice _____	2nd class choice _____			

**PLEASE SUBMIT YOUR CHILD'S BIRTH CERTIFICATE AND BAPTISM CERTIFICATE AT THE TIME OF REGISTRATION**

Special Conditions (learning disabilities, allergies etc) \_\_\_\_\_

I give permission for my child(ren)'s photos to be used in Parish publications and on the website. Y/N

I give permission for my child(ren)'s name(s) to be published on a class list Y/N

**Class schedule:**

<b>Monday</b>	Grades 1-5	4:00-5:15
<b>Monday</b>	Grades 1-5	5:30-6:45
<b>Monday</b>	Grades 6-7-8	7:00-8:15
<b>Tuesday</b>	Grades 1-5	4:00- 5:15
<b>Tuesday</b>	Grades 6-7-8	5:30-6:45

**FEES — All participating families must be registered in the Parish**

<b>One child</b>	\$75.00 total
<b>Two children</b>	\$150.00 total
<b>Three (+) children</b>	\$100.00 per family + \$25 PER CHILD BOOK FEE
<b>Sacrament.Preparation Fee</b>	\$35.00 ADDITIONAL for children preparing to celebrate the sacrament of First Reconciliation and First Holy Communion this year.

Registration Forms received by **May 31, 2021** receive a \$10 per child discount.

The fee schedule returns as posted following May 31, 2021

If classes are filled children will be placed in the 2nd choice class. Unless otherwise indicated the entire family will move to the 2nd choice day.

**Please return this form along with your registration fees**

**to : Attn : Louise Henesy  
Saint Benedict Church  
Office of Religious Education  
950 Darrell Creek Trail  
Mount Pleasant, SC 29466**