

Holy Family Catholic Church / Children's Religious Education Program

Registration form---School Year 2018 / 2019

Register with Church office first if not a member of Holy Family

Pre-School \$00.00

K-12 Grade \$35.00 per student (after July 1, \$40.00)

three or more children \$85.00 (after July 1, \$90.00 )

in addition / Confirmation \$50.00 (no Confirmation is being offered this year)

All new students and Sacrament classes return form with a "copy" of Baptismal Certificates to the DRE

First Communion: a Baptized Catholic / regular attendance in 1st and 2nd grades / receives in 2nd

Confirmation: Baptized Catholic / regular attendance at CRE & Confirmation sessions / 8th-12th grades

Parent / Student Handbooks are to be picked up and read w / child and sign back of registration.

for baptisms contact Fr. Bill @ 801-479-1112

May God Bless you – We Look Forward to seeing all of you this year!

do not detach please

read and sign back with student, thanks

CRE Registration 2018 / 2019

Students Name: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_  
Last, First

Baptized / Church: \_\_\_\_\_ Date: \_\_\_\_\_

First Communion: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation: \_\_\_\_\_ Date: \_\_\_\_\_

Mother's Name: \_\_\_\_\_  
Last, First

Father's Name: \_\_\_\_\_  
Last, First

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact Info: \_\_\_\_\_  
Home phone Cell phone email address



**CATECHIST'S (Teacher) ACKNOWLEDGEMENT STATEMENT**

Parents: please sign at the "bottom" of this sheet

"I have read and understand the contents of this handbook and agree to be governed by this handbook of Holy Family Parish."

\_\_\_\_\_  
Catechist (Teachers) Name

\_\_\_\_\_  
Catechist (Teachers) Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
DRE Signature

**\*PARENT ACKNOWLEDGEMENT FORM**

This is to acknowledge that I/We have received the Holy Family Parish Handbook for Religious Education.

We understand and agree to cooperate with the parish policies set forth in the handbook.

If I have a child in the sacramental classes I understand the attendance policies outlined in this handbook.

\_\_\_\_\_  
\*Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
\*Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

# Student Questionnaire

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Please complete the following to assist the religious education staff in providing the best learning opportunity for your child.

**Allergies.** Does the student have significant allergies to foods, pollen, or chemicals?

\_\_\_/ No. \_\_\_/ Yes. Please describe in the space provided below the allergy and any precautions which the catechist should take. Does your child carry an Epi-Pen?

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**Seizures.** Does the student have a history of seizures?

\_\_\_/ No. \_\_\_/ Yes. Please explain in the space provided below what the procedures the catechist should follow in the event of a seizure.

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**Hearing and Vision.**

Does your child wear glasses? \_\_\_\_\_ No \_\_\_\_\_ Yes

Does the student have a vision or hearing impairment?

\_\_\_/ No. \_\_\_/ Yes. Please explain in the space provided below the nature of the impairment and what the catechist should do to accommodate the student's needs.

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**Physical needs.** Does the student have mobility impairments or need physical assistance?

/ No.  / Yes. Please describe in the space provided below the impairment or needs and what the catechist should do to accommodate the student.

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**Learning:** Describe how your child learns best? By listening, reading, etc.

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**Learning Needs**

Does your child have a learning disability or other special instructional needs?  
Example?

/ No.  / Yes. Please explain in the space provided below the nature of the disability or special needs and what the catechist should do to accommodate the student's needs.

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**Other Concerns:** Please describe any other concerns you have or information you believe will enhance your child's religious education.

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I would like to discuss this with the Director of Religious Education or my child's teacher.  
 No  Yes

I understand that this questionnaire contains confidential information and agree that it may be shared with members of the religious education team who agree to maintain its confidentiality.

Parent/guardian: \_\_\_\_\_ Date: \_\_\_\_\_