

**Student** \_\_\_\_\_ Male\_\_ Female\_\_ Date of Birth \_\_\_\_\_ PLACE \_\_\_\_\_  
 Last Name M.I. First Name  
**Address** \_\_\_\_\_  
 City Zip Code

**EMAIL ADDRESS** \_\_\_\_\_ **(Required)**

**Child/children lives with** 1. Both Parents: \_\_\_\_\_ 2. Mother \_\_\_\_\_ 3. Father: \_\_\_\_\_ 4. Other: \_\_\_\_\_

School Year /	1 /	2 /	3 /	4 /	5 /	6 /	7 /	8 /	9 /	10 /	11 /	12 /
---------------	-----	-----	-----	-----	-----	-----	-----	-----	-----	------	------	------

**GRADE IN SCHOOL AS OF SEPTEMBER 2019** \_\_\_\_\_ Name of School \_\_\_\_\_

**Other children in our program:** Name(s) \_\_\_\_\_

**PARENT (S) LEGAL GUARDIAN INFORMATION**

Father \_\_\_\_\_ PHONE H: \_\_\_\_\_ CELL: \_\_\_\_\_  
 Last First Religion

Mother \_\_\_\_\_ PHONE H: \_\_\_\_\_ CELL: \_\_\_\_\_  
 Last First Maiden Name

**EMERGENCY CONTACT OTHER THAN PARENT**

Name (other than parent ) \_\_\_\_\_ Phone \_\_\_\_\_

**STUDENT'S SACRAMENTAL RECORD ( A COPY OF BAPTISMAL CERT MUST BE ON FILE WITH US)**

Baptized: \_\_\_\_\_  
 Date Church City State (Country)  
 Reconciliation: \_\_\_\_\_ First Communion: \_\_\_\_\_  
 Date Church Date Church  
 Confirmation: \_\_\_\_\_  
 Date Church

**STUDENTS MEDICAL INFORMATION**

**MEDICAL ALERTS-** Any medical condition/medicines, etc \_\_\_\_\_

**SPECIAL INFORMATION** *Please list any Special learning needs or emotional needs for your child.*

**TUITION REGISTERED FAMILY**

\$ 150 FOR 1 child  
 Additional child \$50  
 3or more children \$25 additional each  
**2<sup>nd</sup> year Only - Sacrament fee** \$75 for each Confirmation/Communion Student

**TUITION NON REGISTERED FAMILY**

\$200 FOR 1 CHILD  
 Additional child \$50  
 3or more children \$25 additional each

**Family Service Hours** =10 Hours completed by Parish Service or purchasing items for Carnival or Parish Events/ for every \$5 spent =1hour. Value of Service hours = \$50

**\$50 non- refundable processing fee. No tuition refunds after first class**

**Office Use only below**

**Session** \_\_\_\_\_

Amount Paid\$ \_\_\_\_\_ Date \_\_\_\_\_

**CLASS DAY AND TIMES SESSIONS**

Registered and participating (3 month minimum) families are given first priority. Assignment in a session is dependent on number of registrations for a session, St. John XXIII parish registration and order of your application. Indicate your first choice with the number 1 and your second choice with the number 2. Please print clearly.

Las familias que estan registradas y participando (un mínimo de 3 meses) reciben prioridad. La asignación en una sesión depende del número de inscripciones para una sesión, el registro parroquial en St. John XXIII y el orden de su solicitud. Indique su primera opción con el número 1 y su segunda opción con el número 2. Por favor escribe el numero claramente.

**GRADES 1-5 (BOTH 1<sup>ST</sup> AND 2<sup>ND</sup> YEAR STUDENTS)**

**SATURDAY CLASSES - 8/24, 9/21,10/19,11/16,12/14,1/18,2/8,3/7,4/4 and 5/9**  
**SESSION S-1 9AM-10:30AM \_\_\_\_\_ (no 1<sup>st</sup> Grade class at this time)**

**SESSION S-2 10:45AM-12:15PM \_\_\_\_\_**

**MONDAY CLASSES - 8/19,9/16,10/14,11/11,12/9,1/13,2/10,3/9,4/13,and 5/11**

**SESSION M-1 4PM-5:30PM \_\_\_\_\_**

**SESSION M-2 5:45PM-7:15PM \_\_\_\_\_**

**GRADES 6-11 for 1<sup>ST</sup> YEAR /PRE-CONFIRMATION STUDENTS**

**M2 CLASS Dates 8/19,9/16,10/14,11/11,12/9,1/13,2/10,3/9,4/13,and 5/11**

**SESSION M-2 5:45-7:15PM \_\_\_\_\_**

**M3 CLASS Dates -8/26,9/9,10/7,11/4,12/2,1/6,2/3,3/2,4/6,5/4**

**SESSION M-3 5:15pm-6:30pm \_\_\_\_\_**

**S1 CLASS Dates 8/24, 9/21,10/19,11/16,12/14,1/18,2/8,3/7,4/4 and 5/9**

**SESSION S-1 9:00AM-10:30AM \_\_\_\_\_ (Tentative – min. 10 students)**

**CONFIRMATION GRADES 7-12 - 2<sup>ND</sup> YEAR CONFIRMATION STUDENTS**

**MONDAY CLASSES (USUALLY THE FIRST MONDAY OF MONTH)**

**SESSION M-4 6:15PM-7:45PM \_\_\_\_\_**

**M4 CLASS DATES- 8/26,9/9,10/7,11/4,12/2,1/6,2/3,3/2,4/6,5/4**

**ATTENTION 2<sup>ND</sup> YEAR HOLY COMMUNION STUDENTS**

**ADDITIONAL SATURDAY CLASSES WILL BE REQUIRED TO RECEIVE THE SACRAMENT OF HOLY COMMUNION.**

*For a copy of the calendar of your classes please visit [www.john23parish.org](http://www.john23parish.org) and click on Religious Education tab.*

**PARENT NAME (PRINT):** \_\_\_\_\_ I agree to the following requirements.

1. Tuition payment is due at the time of registration. \_\_\_\_\_  
El pago de la matrícula se debe hacer en el momento de la inscripción. \_\_\_\_\_
2. Each family is responsible for 10 family service hours . \_\_\_\_\_ (SEE ATTACHED SHEET)  
Cada familia es responsable de 10 horas de servicio voluntario. \_\_\_\_\_ (VER HOJA ADJUNTA)
3. Attending weekly Mass is part of your child's class attendance. \_\_\_\_\_  
Asistir a la misa semanal es parte de la asistencia a clase de su hijo . \_\_\_\_\_
4. Mass attendance is monitored by the blue Mass slips put in the offertory collection basket \_\_\_\_\_  
La asistencia a la misa se supervisa mediante la tarjeta azul, que se coloca en la canasta de recolección del ofertorio \_\_\_\_\_
5. Class will begin on time. 5 minutes after class begins, doors will be locked and no one allowed in \_\_\_\_\_  
La clase comenzará a tiempo. 5 minutos después de que comience la clase, las puertas estarán cerradas y no se permitirá a nadie entrar. \_\_\_\_\_
6. If I arrive late to class, I must immediately go to parish office to drop off completed homework and receive the homework for the next class \_\_\_\_\_  
Si llega tarde a la clase, debe ir inmediatamente a la oficina de la parroquia para dejar la tarea terminada y recibir la tarea para la próxima clase \_\_\_\_\_
7. The ONLY absences from class will be medical emergencies. These emergencies must be communicated to the Religious Education Department on the day of the missed class \_\_\_\_\_  
Las ÚNICAS ausencias de clase serán emergencias médicas. Estas emergencias deben comunicarse al Departamento de Educación Religiosa el día de la clase perdida \_\_\_\_\_
8. I have received a calendar of classes upon registration. I understand these are the assigned dates and times that my child and I must attend \_\_\_\_\_  
He recibido un calendario de clases al registrarme. Entiendo que estas son las fechas y horas asignadas a las que mi hijo y yo debemos asistir \_\_\_\_\_
9. I have received the handbook and will read the policy and procedures by the first class. \_\_\_\_\_  
He recibido el manual y leeré la política y los procedimientos de la primera clase . \_\_\_\_\_
10. I understand that my child will receive two lessons on Teaching Safety Empowering God's Children. If I do not wish my child to attend the lessons I must submit an opt-out form by September 15, 2019. I understand my child and I will still need to attend the session on the assigned evening. \_\_\_\_\_  
Entiendo que mi hijo recibirá dos lecciones sobre cómo proteger a los hijos de Dios. Si no deseo que mi hijo asista a las lecciones, debo enviar un formulario de exclusión antes del 15 de septiembre de 2019. Entiendo que mi hijo y yo todavía tendremos que asistir a la sesión en la noche asignada. \_\_\_\_\_.

### **SERVICE HOURS**

Your family is responsible for 10 service hours. We offer many ways for you to complete these hours during the school year. Please refer to the service hour sheet in your registration package.