



**ST MARY MAGDALEN CHURCH**  
**OAKVILLE, CONNECTICUT**  
**FAITH—WORSHIP—SERVICE**

**Religious Education Registration 2021-2022**

**Enroll now for the upcoming year of religious education. Please fill in *all* information on this form. If you are registering a child for the first time, please attach a copy of all Sacramental Certificates for that child if the sacrament was not received at St. Mary Magdalen Church. Please refer to the schedule of fees to determine the payment due.**

**Schedule of Fees:**

<b>Program Fee:</b> 1 child - \$60.00	2 children - \$85.00	3 or more children - \$100.00	\$ _____
<b>First Communion Retreat Fee</b> (3 <sup>rd</sup> grade student)	additional \$35.00		\$ _____
<b>Confirmation I Workshop Fee</b> (9 <sup>th</sup> grade student)	additional \$50.00		\$ _____
<b>Confirmation II Workshop &amp; Retreat Fee</b> (10 <sup>th</sup> grade student)	additional \$60.00		\$ _____
	<b>TOTAL</b>		\$ _____

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 Mother's Name \_\_\_\_\_ Religion: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
 Address: \_\_\_\_\_ Town: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion: \_\_\_\_\_ Marital Status: \_\_\_\_\_  
 Address: \_\_\_\_\_ Town: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email \_\_\_\_\_

Guardian's Name \_\_\_\_\_ Religion: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_ Town: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Email \_\_\_\_\_

**Name and grade of student(s) registering:**

_____	Grade _____	School _____	Birthdate _____
_____	Grade _____	School _____	Birthdate _____
_____	Grade _____	School _____	Birthdate _____
_____	Grade _____	School _____	Birthdate _____

**Other than the parents listed above, authorized transporter for student(s) authorized to drop off and/or pick up your child(children) or to pick up your child(children) in case of an emergency:**

Contact name _____	Contact name _____
Telephone _____	Telephone _____
Address _____	Address _____
Town _____	Town _____
Relationship to student(s) _____	Relationship to student(s) _____

**List any protective orders, anyone not allowed to pick up your child (children):**

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**Medical Information:**

List any allergies, medical conditions, special needs or accommodations. (All information is strictly confidential)

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**Please be advised that our catechists are volunteers and are not able to administer Epi-Pens or any other medications.**

I give permission for my child's teacher to call 911 for emergency treatment while attending religious education classes if I cannot be contacted.

Preferred Hospital \_\_\_\_\_  
Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Media Release**

I, \_\_\_\_\_ consent for the images of the above listed children to be used in photographs, video, and film recordings made by and for St. Mary Magdalen Church. In giving consent, I release the photographer and St. Mary Magdalen Church and designated from liability for any violation of any personal or proprietary right I may have in connection with such reproduction or use.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Parent's Pledge**

It is my decision to register my child/children in Religious Education classes at St. Mary Magdalen Church. At the time of Baptism, I made a promise to God to nurture my child in the Catholic faith, and I realize that the best example of Christian living comes from our home. I understand that religious education classes are meant to enhance our knowledge of Christ and His Church, but do not take the place of worshipping God at Mass each week. Our presence at Mass is of utmost importance, as it is the celebration of Eucharist, the central sacrament of the Catholic faith. I fully understand and agree that religious education classes are not a substitute for following God's command, and I acknowledge that it is my responsibility, as a Catholic parent or guardian, to do my best to attend weekly Mass with my family in order to grow in faith together.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**VOLUNTEERS ARE ALWAYS WELCOME!**

We are always looking for parents to share their time and talents with the children in our program.

\_\_\_\_\_ I would be interested in becoming a catechist.                      Grade level \_\_\_\_\_  
\_\_\_\_\_ I would be interested in becoming a classroom aide.                      Grade level \_\_\_\_\_  
\_\_\_\_\_ I would be interested in becoming a substitute catechist.                      Grade level \_\_\_\_\_

**Please return completed registration with payment by Wednesday, June 30, 2021**