



Faith Formation - Grades 1-8 Registration 2016/2017

Church of St. Joseph • 1154 Seminole Ave. • W. St. Paul, MN 55118 • 651-457-8841

www.churchofstjoseph.org

Registration Deadline: August 19, 2016

<u>Name of Student(s)</u> <small>First, middle & last (if different than parent)</small>	<u>M/F</u>	<u>Birthdate</u>	<u>16/17 Grade</u>	<u>School</u>
_____	_____	___/___/___	_____	_____
_____	_____	___/___/___	_____	_____
_____	_____	___/___/___	_____	_____
_____	_____	___/___/___	_____	_____

Last Name: _____

Church Env. #: _____

Father: _____

Mother: _____

Address: _____

Address: _____

City/State/Zip: _____

City/State/Zip: _____

Phone: (h) _____ (w) _____

Phone: (h) _____ (w) _____

(c) _____

(c) _____

E-mail: _____

E-mail: _____

Parent or Guardian with whom child(ren) live: _____ If parents are not living together, should we send mailings to both parents? Y / N

CLASSES ARE HELD FROM SEPTEMBER to MAY

CLASS TIMES FOR ALL GRADES: 6:15-7:30 pm on WEDNESDAY EVENINGS

TUITION:

Registered Parishioners:	1 child - \$110	2 children - \$198	3 or more children - \$253.00
		<i>20% discount for 2nd child</i>	<i>50% discount for 3rd Child</i>
Non-parishioners:	1 child - \$200	2 children - \$360	3 or more children - \$460.00

A **\$50.00 non refundable minimum payment** is required with registration to hold your place.

Attention Non-parishioners: Please note that during Sacramental preparation years we will prepare your child for the sacrament, however the sacrament will be administered through your home parish unless you have contacted the Director of Faith Formation for details.

Tuition Policy: Families who are past due in their tuition from the previous year will not be eligible to register for this year until arrangements are made with Mike Snyder, Parish Administrator, at 651-457-2781.

Full time Catechist may waive one tuition fee of \$110: (Note any student receiving full tuition credit can not be counted when calculating a multi-child discount.)

Financial Need: If tuition is a financial hardship for you, please contact the F. F. Office for a Financial Aid Request form.

Financial Contributions: Please consider a donation to the FF Program to be used to offset expenses for those families unable to pay full tuition, or toward the purchase of additional lesson-enhancing materials. Your donation is tax deductible.

Amount enclosed: _____

Donation enclosed: _____

We also have a child(ren) in the Good Shepherd program.

- please see back -

<u>Office use only</u>	
Date Rec'd:	___/___/___
Amt. Pd:	_____
Ck#:	_____

Parental Help Needed:

- I will be a catechist.* Grade preference? _____ *Catechists may waive one tuition fee.
- I will be a catechist assistant/aide. Grade preference? _____
- I will be a substitute catechist. Grade preference? _____
- I will help planning/working Special Events, like Family Faith Nights.
- I will be a hall monitor.

Special Needs Information:

List any information about your children's physical, mental, or emotional needs that may help us better serve your family. This information will be kept confidential for the director and the child's teacher only. **(Please repeat and update any information you have given us in past registrations.)** i.e., A.D.D., A.D.H.D. medications, disabilities (please use relevant medical terms), reading difficulties, accelerated learner, vision/hearing loss...

- Please update his/her file:

My child has NOT received the following Sacrament before the grades listed below:

- Baptism:** Please list name(s) of child(ren) **grade 1 or higher:**
- Reconciliation:** Please list name(s) of child(ren) **grade 3 or higher:**
- First Eucharist:** Please list name(s) of child(ren) **grade 3 or higher:**

Note to the Director: