

## 2018-19 REGISTRATION

	M or F	DOB	Grade & School (Sept '18)
<b>Child 1:</b>	_____	_____	_____
<b>Child 2:</b>	_____	_____	_____
<b>Child 3:</b>	_____	_____	_____

	Previous Religious Instruction	Baptism*	1 <sup>st</sup> Eucharist
<b>Child 1:</b>	Grade(s): _____ Parish or School: _____	Date: _____ Church: _____	Date: _____ Church: _____
<b>Child 2:</b>	Grade(s): _____ Parish or School: _____	Date: _____ Church: _____	Date: _____ Church: _____
<b>Child 3:</b>	Grade(s): _____ Parish or School: _____	Date: _____ Church: _____	Date: _____ Church: _____

\* If your child is in the 1<sup>st</sup> Communion program this year please submit his/her Baptismal Certificate w/this reg. form

	Address	Tel. #s
<b>Parent 1:</b>	_____	_____
	_____	_____

**Parent Email Address (print legibly)** \_\_\_\_\_

Parishioner of Mater Christi?  Y    or     N    (Please Check One)

	Address (If different than Mother)	Tel. #s
<b>Parent 2:</b>	_____	_____
	_____	_____

**Parent Email Address (print legibly)** \_\_\_\_\_

Parishioner of Mater Christi?  Y    or     N    (Please Check One)

If parents' addresses are different, where should correspondence be sent or telephone calls be made?  
 Parent 1     Parent 2     Both    (Please Check One)

**Tuition**

**Registered Parishioners** of Mater Christi = **\$35.00 per child** for K-10

**Non-Registered Parishioners** of Mater Christi = **\$50.00 per child**

You may send in a check or cash or, pay the fee online through the link on the home page of our website.

(Please know that **all are welcome** into our program – **if you are unable to pay this fee** at this time contact Mrs. McSparron)

**In Case of an Emergency**

We will 1<sup>st</sup> notify the parents/guardians at the #s provided on the front of this form.

If unable to reach parents who should we contact?

1. \_\_\_\_\_ Relationship to child: \_\_\_\_\_

Telephone #s: \_\_\_\_\_

2. If Unable to Reach #1, Notify: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone #s: \_\_\_\_\_

If we need to evacuate the building in the event of an emergency, our policy is:

1. If the emergency is limited to the School, the children will be evacuated to the Parish Center;
2. If it is limited to the Parish Center, the children will be evacuated to the School; and
3. If we need to evacuate both buildings, the children will go to the Bethany Reformed Church on New Scotland Avenue, unless otherwise directed by emergency personnel.

In the event of an emergency dismissal, please name (if any) another parent that your child has permission with which to leave the premises:

1. \_\_\_\_\_

2. \_\_\_\_\_

In the event that I or the emergency contact person(s) cannot be reached, I give permission for my son/daughter to be evaluated, diagnosed, treated &/or medicated in accordance with standard medical practice by licensed medical personnel. I relieve Mater Christi Parish of all responsibility and consequences that may arise as a result of this treatment.

I will not hold The Parish of Mater Christi or chaperones or representatives associated with Mater Christi responsible in the event of injury. Further, I agree to accept any and all financial responsibility as a result of scheduling such treatment.

\_\_\_\_\_  
Parent/Guardian Date: \_\_\_\_\_

**Special Needs**

**Medical** condition of which we need to be aware \_\_\_\_\_

Required Medication \_\_\_\_\_

Allergies (Food &/or Drug) \_\_\_\_\_

**Learning/Behavioral** – SEE ATTACHED FORM (pages 4 & 5)

**Publishing Photos**

I do **NOT** give the Religious Ed. Program or Mater Christi Parish permission to publish my child’s photo on our parish or program website, facebook page, or other social media or on our church bulletin boards (**Please Note: We never use names unless we receive your permission!**).

**Please do NOT SIGN this if you DO give us permission to publish photos.**

\_\_\_\_\_  
Parent: By typing your name you are signing this document

\_\_\_\_\_  
Date

# RELIGIOUS ED. VOLUNTEER OPPORTUNITES

\_\_\_\_\_ **Catechist/Teacher/Group Leader** Grade interested in: \_\_\_\_\_

- training & support during the summer and 'as needed'
- team teaching encouraged – form your own team or we will find you a partner

\_\_\_\_\_ **Classroom Aide** Grade interested in: \_\_\_\_\_

- assist teacher with small group activities and behavior management

\_\_\_\_\_ **Substitute Teacher** Grade interested in: \_\_\_\_\_

- there may be a planned teacher absence & you will be notified in advance or, there may be an illness or emergency & you will be called the evening prior to the session or even early AM of the class day

\_\_\_\_\_ **Gatekeeper/Building Supervisor** Grade level interested in: \_\_\_\_\_

- maintain security, lock doors, collect attendance rosters, walk the halls & generally, being aware of who is or is not in the building in case of an emergency
- this vol. position is necessary on the elementary, middle and high school levels

\_\_\_\_\_ **Set-up or Clean-up for Family Events**

- Set up Thursday evening, Friday afternoon, or Friday evening
- Clean up on Sunday approximately 3:00 or 5:00 PM

**Other (where do your talents lie – how else can you help?)**

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## **Background Check & Virtus Training**

All adults (18+) working with our children must submit a background check form and attend the Diocesan Virtus training. Please check *The Evangelist*, the diocesan website ([www.rcda.org](http://www.rcda.org)), or our Bulletin for the schedule of training sessions throughout our area.

*The Parish of Mater Christi  
Religious Education Program  
Individual Student  
Special Needs Information  
2018-19 School Year*

**CONFIDENTIAL**

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

Grade Level (2018-19): \_\_\_\_\_

Form Completed By: \_\_\_\_\_

Approximate Educational/Behavioral Level of Student:

1. **Reading**    Above Grade Level    Grade Level    Below Grade Level

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. **Writing**    Above Grade Level    Grade Level    Below Grade Level

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. **Behavioral** Please specify any behavioral issues surrounding your child that may interfere with his or her receiving catechesis in a group environment. What behavioral strategies are being employed at school and/or at home that may also help his/her Religious Ed. instructor?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. **Physical** Does your child experience/suffer from any physical limitations, e.g., motor, visual, auditory, etc? Please explain.

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5. **Custodial** Are there any custodial issues we need to be aware of?

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6. **Other** Please explain any other concerns your child may be experiencing, e.g., emotional, attitudinal, etc.

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**7. DOES YOUR CHILD NEED A 1-TO-1 AIDE? IF WE CANNOT SECURE A VOLUNTEER, ARE YOU WILLING TO STAY WITH HIM OR HER?**

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