

St. Columba's Religious Education Program
29 High Street, Chester, NY 10918 ~ 845-469-9503

We Share (online giving)

Early Bird Special 4/2-5/14

1 child \$80 ~ 2 children \$120 ~ 3 or more \$150

After 5/14 ~

1 child \$95 ~ 2 children \$135 ~ 3 or more \$165

*** Sacramental Fee First Penance and First Holy Communion \$25 * Confirmation \$65**

Without We Share (online giving)

1 child \$140 ~ 2 children \$180 ~ 3 or more \$ 210

1 child \$165 ~ 2 children \$205 ~ 3 or more \$235

Wednesday Program (4:30PM – 6:00PM) - K/1, 4th, 5th, & 6th
Sunday Program (9:00AM-10:30AM) - K/1 (only 24 seats), 2nd, 3rd, 4th/5th, & 6th
Sunday Program (11:30AM – 12:30PM) 7th & 8th (Confirmation)

Registration Form 2017/2018

Name _____ Home Phone _____

Birthday _____ Name of school attending _____

School Grade this September _____ Religion Grade Level _____

Address _____

(Street) (city) (state) (zip)

email address _____

Father's Name _____ Religion _____

Occupation _____ Cell Phone _____

Mother's Name _____ Religion _____

Occupation _____ Cell Phone _____

Living With: Please check appropriate line

Both Parents Mother only Father only Mother/Stepfather Father/Stepmother

Check Only if applicable:

Custody Papers Guardianship papers Restraining Order

Special Medical Condition/Medications: _____

*****Allergies:** _____

Learning Disability(Remains Confidential) _____

Emergency Contact: _____ Relation to Child _____

Cell phone _____ Home phone _____

In case of accident or illness, I request that the representative of the Parish Catechetical Program contact me. I understand that in the event of an emergency where the parent/guardian or emergency contact cannot be reached, member of the staff of St. Columba's have the authority to take my child/children from the building to seek medical assistance. I agree to assume the financial responsibility for any diagnosis, treatment, and or medication deemed necessary.

Parent/Guardian Signature

Date

Photo Release: The St. Columba Religious Education Program has my permission to release pictures of my child for use in the newspaper, the Parish bulletin or display within the buildings of St. Columba.

Parent/Guardian Signature _____ Date _____

This section for Children NEW to the program

Grade child is registering for _____

Has received First Penance and/or First Communion? Yes _____ No _____

Baptism church Name _____ Date _____

****You must include a copy of the Baptismal Certificate.**

First Communion Church Name & Address _____

First Penance Church Name & Address _____

Name & Address of previous Religious Education of Child:

Religious Ed. Program _____ Catholic School _____

Name _____

Address _____

Applications for new students cannot be processed until records are received from previous program.

____ Please register my cell phone on Flock Notes.

Office Only: Date Paid _____ Amount _____

Balance Due: _____

Check _____ Cash _____ Money Order _____

Sacramental Fee for First Penance and First Communion \$25 Paid _____

Confirmation Sacramental Fee \$50 Paid _____