

2019 - 2020 Religious Education Registration

Christ the King Catholic Church

Please review all information listed. Please Edit any information that has changed or is missing.
Fees & due dates are listed at the bottom of the next page.

Student

Name:

First Name Nickname Middle Last Name

Address: _____

Gender: _____

School (2019-2020): _____

DOB: _____

Did your child attend religious education classes in 2018-2019? If so, where? _____

1.) Indicate Grade in School 2019-2020 _____ **Placement (office use)** _____

2.) Which class time do you prefer? (We will make every effort to accommodate, based on availability.)
 _____ **Sunday 10:15 - 11:30 A.M.** (Grades K – 8) **OR** _____ **Wednesday 6 - 7:15 P.M.** (Grades 1 - 8)
Per Fr. Len, we no longer consider requests for friend placements within classes.

SACRAMENT INFORMATION (We will need copies of Sacramental certificates)

Baptism Date: _____ **Parish Name, City and State** _____ **Catholic Baptism?** Circle one **Yes** **No**

First Communion: _____ **Parish, City and State** _____

Has your child been Confirmed (During RCIA or Orthodox Baptism): **Yes** or **No**

Parent Information: Please update any information that needs correction. E-mails listed below will be used for ALL communication from the RE Office. It is your responsibility to provide our office with new contact information.

Mother's Name: _____ **Maiden Name:** _____ **Contact #:** _____

Religion: _____ **email:** _____

Father's Name: _____ **Contact #:** _____

Religion: _____ **email:** _____

Please Consider Volunteering

_____ I am interested in learning more about volunteering as a Catechist/Teacher or as an Assistant Catechist/Teacher.

_____ I have a high schooler would like to volunteer with K - 8th Name: _____

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Medical Information- In order to serve your child to the best of our ability, it is necessary for the catechist to know of any learning disabilities, medical problems or other conditions which may require special attention during class sessions.

Any notes listed above are from prior year registration forms. If you would like us to add or remove any notes, please feel free to indicate above.

In case of emergency, in the event parents or legal guardians cannot be reached, please contact:

We need to be aware of any special circumstances, custody issues, etc. pertaining to your child. You will be contacted by the Religious Education office to discuss specifics. Please note below:

Acknowledgements:

I authorize and give full consent to photograph my child during parish activities and events. This may be used in the parish bulletin, parish web site or on parish bulletin boards.

_____ I DO (or DO NOT _____) give permission for my child's likeness to be included in such publicity releases.
Please initial if "YES" initial above if "NO" * Please note, the child's name will never be published.

Parents of Students in Grades 1, 2, 7, 8 or any student preparing for a Sacrament.

Please read and initial all items below.

- _____ I understand 2 consecutive and immediate years of faith formation is required before he/she can receive a Sacrament.
- _____ I understand that my child is allowed **no more than five (5) absences (excused or unexcused)** during Sacramental preparation years. **If more than 5 classes are missed, Fr. Len will require a meeting with the family and we may need to repeat the year if 5 absences are exceeded.** (Applies to grades 1,2,7,8 and other sac prep yrs)
- _____ I understand if either the Baptism or First Communion information listed on page 1 of this document is missing, I will need to bring copy of my child's sacrament certificate for his/her file.
- _____ **As parents, we agree that it is our responsibility to be the first and foremost educators for our child, to teach and model the Catholic faith to our child. We promise to attend weekly Sunday Mass, or Saturday Vigil Mass, with our child.**

Signature of Parent / Guardian

Relationship to Child

Please return this form, with payment (by check or cash), to our office. You may also mail them to:

Christ the King Catholic Church, RE Office, 821 S. Dale Mabry Hwy., Tampa, FL 33609

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|--------------------------------|---------------------|---|----------------|---------------------|
| Fees for forms received | April 7 - June 30 | - | \$65 per child | Early Registration |
| | July 1 - August 11 | - | \$70 per child | Summer Registration |
| | August 12 and later | - | \$85 per child | Late Registration |

If you have another child who did not attend RE classes in 2018-2019, you can obtain a form from our office or print a form from the parish website at: www.ckk-tampa.org/faith-formation/