

K-5
2024-25

Whole Parish Catechesis Family Registration for Grades K – 5

St. Junipero Serra Parish - Office of Faith Formation

80 Hayes Rd., South Windsor, CT 06074

www.SaintJuniperoSerra.org phone: 860-644-2549 email: FaithFormation@sjs-sw.org

Please print clearly and fill out everything.

Family \ Household Last Name _____ Child(ren) Last name if different _____

Father's first name _____ Religion _____ Cell # _____ Email address (please print clearly) _____

Mother's MAIDEN First name _____ Religion _____ Cell # _____ Email address (please print clearly) _____

Mailing address Street/PO Box _____ City _____ Zip _____ Home Phone _____

Parent Information: Marital Status: Single ___ Married ___ Divorced ___ Remarried ___ Widowed ___

Emergency Contact _____
Name _____ Relation _____ Phone _____

Child 1: _____
First Name _____ M/F _____ DOB: _____ Grade _____ Allergy (you are welcome to bring own food) _____

Child 2: _____
First Name _____ M/F _____ DOB: _____ Grade _____ Allergy (you are welcome to bring own food) _____

Child 3: _____
First Name _____ M/F _____ DOB: _____ Grade _____ Allergy (you are welcome to bring own food) _____

Child 4: _____
First Name _____ M/F _____ DOB: _____ Grade _____ Allergy (you are welcome to bring own food) _____

Please choose your WPC option (Saturday OR Sunday)

_____ Saturday, Session A will begin at the 4 p.m. Mass- until 6:30 p.m.; Dates 9/21, 10/26, 11/16, 1/25, 2/08

_____ Sunday, Session B will begin at the 11 a.m. Mass – until 1:30 p.m.; Dates 9/22, 10/27, 11/17, 1/26, 2/09

If your child is making a Sacrament this year, please list your child's name and Sacrament.

* First Reconciliation (Gr. 2); *First Eucharist (Gr. 3)

Child 1: _____
Name _____ Sacrament _____ City, State of birth _____

Child 2: _____
Name _____ Sacrament _____ City, State of birth _____

Child 3: _____
Name _____ Sacrament _____ City, State of birth _____

Child 4: _____
Name _____ Sacrament _____ City, State of birth _____

Baptismal Certificates are required of new students and must be submitted with registration.

*Please indicate your child's place of Baptism below

St. Francis of Assisi _____ or St. Margaret Mary _____ (we should have these certificates on file)

Other Parish _____



WPC - Gr K-5, Registration fee, **if you attend our Registration Night** on June 4, 2024

\$80 For a family with **one child**

\$100 For a family with **two or more children**

WPC - Gr K-5, Registration fee, **if you do not attend** our Registration Night on June 4, 2024

\$90 For a family with **one child**

\$110 For a family with **two or more children**

Sacramental fee, children making their primary sacraments will pay an additional \$30 for materials provided during their four sacramental workshops which will be held during the year. The primary sacramental program is a two-year program. **\$30 for** First Reconciliation (usually Gr. 2) **\$30 for** First Eucharist (usually Gr. 3)

IMPORTANT PERMISSIONS

Photo Permission: I give permission for my child(ren) to be **photographed** by St. Junipero Serra Parish and I understand that the photos may be used to publicize parish activities. They may appear on the parish website and other parish social media. Names of individuals will not be posted alongside photos.

Yes, I give permission for my child to be photographed _____

No, I do NOT give permission for my child to be photographed _____



The Child Lures Prevention Program 'Think First & Stay Safe' Permission

As required by the Archdiocese of Hartford, to be presented every year, will be presented to all families at one of our scheduled sessions. Please verify by initiating the statements below.

___ **I acknowledge the Safe Environment Program is being offered during 2024/25 WPC**

___ my child **has permission** to participate in the safe Environment program class

___ It is my choice that our family **NOT** participate in the **Safe Environment program**. (This means you are opting out and your child will not attend the Child Lures program)

* If you have chosen to opt out of the program, please **fill out the OPT out FORM** - materials from the parish will be provided to you to use to instruct your child(ren) on the topic.

Name of Parent or Guardian (please print clearly) _____

Signature _____ Date _____

Today's date _____ Total Due _____ AMT Received _____ Cash _____ Check number _____ Venmo _____

