

For Parish Use

Family ID#

St. Andrew the Apostle Roman Catholic Parish

2024-2025 RELIGIOUS EDUCATION REGISTRATION FORM

(FOR ALL STUDENTS – NEW AND RETURNING)

Date: ____ / ____ / ____

To register a child in the Religious Education Program at St. Andrew the Apostle, his or her family must be registered with the Parish. If your family is not registered or if you are unsure, please contact the office staff.

Parent(s)/Guardian: _____
(Father's First/Middle/ Last Name) (Mother First/Middle/ Maiden)

Child lives with: ☐ Mother ☐ Father ☐ Both ☐ Other: _____

Address: _____

Father Cell: _____ Mother Cell: _____

Father email: _____ Mother email: _____

Mass regularly attended: ☐ Saturday 5:00PM ☐ Sunday 8:00 AM ☐ Sunday Noon
☐ Saturday 6:30 PM ☐ Sunday 10:00 AM ☐ Sunday 5:00 PM

If your child(ren) received Sacraments at a parish other than St. Andrew's, you must include a copy of their birth and baptism certificates, and First Communion certificate (if applicable).

Child's Name: _____ Date of Birth: ____ / ____ / ____ Age: ____
(First) (Middle) (Last)

Current School: _____ Grade in Fall 2024: ____

Allergies or special considerations: _____

Check Sacraments Received: ☐ Baptism Parish: _____
☐ 1st Confession Parish: _____
☐ 1st Communion Parish: _____

PreK-1st Grade (CGS I) on Sundays 8:30-9:45 AM ☐ **OR** **Tuesdays 10-11:30 AM** ☐

First Communion (CGS II): 2nd Grade from 5-6:30 PM on **Tuesdays** ☐ **OR** **Wednesdays** ☐

Sacrament Preparation Gds. 4-8 on Sundays 8:30-9:45 AM ☐ **Gds. 3-5 on Sundays 8:30-9:45 AM** ☐

Gds.6-8 Tuesdays 5-6:30 PM ☐ **Confirmation Gds. 9+10 Mondays 7-8:15 PM: Year 1** ☐ **Year 2** ☐

Child's Name: _____ Date of Birth: ____ / ____ / ____ Age: ____
(First) (Middle) (Last)

Current School: _____ Grade in Fall 2024: ____

Allergies or special considerations: _____

Check Sacraments Received: ☐ Baptism Parish: _____
☐ 1st. Confession Parish: _____
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Child's Name: _____ Date of Birth: ____/____/____ Age: ____
(First) (Middle) (Last)

Current School: _____ Grade in Fall 2024: ____

Allergies or special needs: _____

Check Sacraments Received: ☐ Baptism Parish: _____
☐ 1st. Confession Parish: _____
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PARENT(S) / GUARDIAN(S) AGREEMENT

- ☐ I understand the importance of Sunday Mass and commit to attending Sunday Mass each week at St Andrew's or at another Catholic church unless illness prevents us.
- ☐ I understand that it is important for my child to attend Faith Formation classes regularly, and that I will send a note of explanation for any unavoidable absences.
- ☐ I understand my responsibility to bring my child on time, and pick my child up within 15 minutes after being released from class.
- ☐ I accept my baptismal responsibility of being the primary religious education teacher of my child, supported by the Church.
- ☐ I understand that St. Andrew's is in full compliance with the Diocese of Tucson safe environment policies and that we will conduct age-specific safe environment training during classes.

I am/We are willing to help in the following capacity:

____ St Nick's Fair (*December*) ____ Assistant Catechist or Aide at the ____ grade level
____ Christmas Play (*Nov / Dec*)_ ____ Youth Ministry (EDGE, Life Teen)
____ Sacraments Retreat helper (*February*)

Emergency Contact: (A person other than the child's parent/guardian)

Name: _____ Phone: _____

Email Address: _____ Relationship: _____

In case of an emergency or illness and neither parent can be reached, do you authorize the Director of Religious Education or staff member to act if medical assistance is necessary? ☐ **Yes** ☐ **No**

I/We have read and understand the above information:

Print Name: _____

Print Name: _____

Signature: _____

Signature: _____