

March 2018

Dear Parent(s)/Guardian,

Please take the time to read this entire letter – it contains important information for you regarding the 2018/2019 registration process:

- **All students must register regardless if they are already in our program. The Registration 2018/2019 form must be used to register all of the children in the family. First grade or new students to the program must have a New Student Registration form attached to the Registration 2018/2019 form. In addition to the New Registration form, new students require a copy of the child's baptismal certificate (unless baptized at St. Raymond Church).**
- Please note in order to have your child(ren) **placed and confirmed** in a class, full **payment** including additional fees must be submitted along with the Registration forms. All outstanding fees for 2017/2018 must be settled as well before sending in this Registration form.
- **All Religious Education families must be formally registered parishioners.** Do not assume that if you were married or that your children were baptized here that you are formally registered as a parishioner. If you are not sure that you are registered, please contact the Rectory at 516-593-5000 for verification.
- The 2018/2019 class times are:

| | | |
|------------------------|--------------------|---------------|
| Grades 1, 3, 4, 5, 6 – | Mon/Wed/Thurs – | 3:30pm-4:30pm |
| Grade 2 – | Tuesdays – | 3:30pm-4:30pm |
| Grades 7 & 8 – | Mondays/Tuesdays – | 7pm-8pm |
- Please note that the **non-refundable** registration fees are as follows – make checks payable to St. Raymond Religious Education:

| | |
|---|----------|
| REGISTRATION AND BOOK FEE FOR FIRST CHILD IN FAMILY: | \$150.00 |
| EACH ADDITIONAL CHILD (BOOK INCLUDED): | \$ 75.00 |
| ADDITIONAL FEES: | |
| 8 TH GRADE STUDENTS 2019 CONFIRMATION FEE: | \$100.00 |
| 6 TH GRADE STUDENTS BIBLE FEE: | \$ 10.00 |
| 2 ND GRADE STUDENTS 2019 COMMUNION FEE: | \$ 80.00 |
- Choice of days is being accepted on a first-come, first-serve basis (**REGISTRATION FORM AND FULL PAYMENT MUST BE SUBMITTED TOGETHER IN ORDER TO HOLD YOUR CHILD'S SPOT IN A CLASS**). If you are in a car-pool situation, please register early with the car-pool group at the same time.
- **DO NOT REQUEST A SPECIFIC TEACHER.** There is no guarantee that your child will have the same teacher year after year. Some teachers have suggested that certain children should not be in a class together because they can become distracted. I will adhere to the teacher's request.
- We will continue to utilize the School Messenger system in order to contact you via phone and e-mail for meetings, emergency closings, etc. St. Raymond Religious Education will also continue to report school closings due to inclement weather on NBC, News12 and FIOS1 News. Keep in mind to keep my office updated as to any changes in phone numbers/e-mail addresses. Parent(s)/Guardian are encouraged to obtain information, i.e. meeting dates, Children's Masses, etc. by logging on to www.saintraymonds.org and clicking on the Religious Ed tab. Please refer to it as often as you need to.
- St. Raymond Religious Education has a Facebook page. Here last minute notifications and reminders will be posted. Please take the time to 'like' us and become part of the page.

Please mail or send in all Registration forms with full payment. If you have any questions, please feel free to call me. May the Lord always be with you and your family.

Sincerely yours in Christ,

Evelyn Contaldi
Director of Religious Education

REGISTRATION 2018/2019 (ALL FAMILIES MUST COMPLETE THIS FORM)

SAINT RAYMOND'S RELIGIOUS EDUCATION OFFICE

263 Atlantic Ave., East Rockaway, NY 11518

Tel: 516-593-9075/Fax: 516-593-1156 – econtaldirre@optonline.net

NEW FAMILIES TO THE PROGRAM (GRADES 1-8) MUST BE REGISTERED WITH THE PARISH, FILL OUT A NEW STUDENT REGISTRATION FORM ALONG WITH THIS FORM AND MUST HAVE A BAPTISMAL CERTIFICATE. IF THE CHILD WAS BAPTIZED AT ST. RAYMOND, A BAPTISMAL CERTIFICATE IS NOT NECESSARY, BUT THE DATE OF BAPTISM IS REQUIRED FOR VERIFICATION WITH THE RECTORY.

FAMILY LAST NAME: _____ HOME TEL. #: _____
ADDRESS: _____ DAD CELL #: _____
TOWN: _____ ZIP: _____ MOM CELL #: _____

PLEASE PROVIDE ONE PRIMARY PHONE NUMBER AND E-MAIL ADDRESS FOR RELIGIOUS ED TO CONTACT PARENTS IN CASE OF LAST MINUTE SCHOOL CLOSINGS, ETC.

Print clearly:

SCHOOL MESSENGER PHONE NUMBER: _____

SCHOOL MESSENGER E-MAIL ADDRESS: _____

ARE YOU A RELIGIOUS ED TEACHER - YES OR NO _____ NO REGISTRATION FEES FOR TEACHERS

RELIGIOUS EDUCATION CLASS SCHEDULE

GRADES 1, 3, 4, 5 & 6 MON/WED/THURS 3:30-4:30PM GRADE 2 TUESDAYS ONLY 3:30-4:30PM
GRADES 7 & 8 MON or TUES 7PM-8PM

YOU WILL BE BILLED THE BANK FEE FOR ANY RETURNED CHECK.

REGISTRATION FEES ARE NON-REFUNDABLE AT ANY TIME.

| Student's First & Last Name | School | Religion Grade in September | Assignment and Date Office Use Only | Payment Rec'd Check #/Cash Office Use Only |
|-----------------------------|--------|-----------------------------------|---|---|
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REGISTRATION FEES: (MAKE CHECK PAYABLE TO ST. RAYMOND RELIGIOUS EDUCATION)

REGISTRATION AND BOOK FEE FOR FIRST CHILD IN FAMILY: \$150.00
EACH ADDITIONAL CHILD (BOOKS INCLUDED): \$ 75.00

ADDITIONAL FEES

8TH GRADE STUDENTS 2019 CONFIRMATION FEE: \$100.00
6TH GRADE STUDENTS NEED TO PURCHASE A BIBLE: \$ 10.00
2ND GRADE STUDENTS 2019 COMMUNION FEE \$ 80.00

- 1. DO NOT REQUEST A SPECIFIC TEACHER. FULL PAYMENT IS REQUIRED AT TIME OF REGISTRATION.**
- 2. CHOICE OF DAYS WILL BE HONORED ON A FIRST-COME, FIRST-SERVE BASIS ONLY. CLASS SIZE IS LIMITED- SEND IN YOUR REGISTRATION FORM WITH FULL PAYMENT AS SOON AS POSSIBLE IN ORDER TO HOLD YOUR CHILD'S SPOT IN A CLASS.**
- 3. KEEP IN MIND YOUR CHILD'S AFTER-SCHOOL ACTIVITIES WHEN COMPLETING THIS FORM.**
- 4. IF YOU ARE IN A CARPOOL SITUATION, PLEASE REGISTER TOGETHER.**

1st CHOICE OF DAY _____ 2ND CHOICE OF DAY _____

PLEASE COMPLETE & SIGN ON THE BACK OF THIS FORM

WILLING TO SUBSTITUTE FOR CHILD'S CLASS? YES _____ NO _____

PLEASE SHARE ANY SPECIAL NEEDS YOUR CHILD MIGHT HAVE (self-contained class, learning disability, allergies or any other specific problems). _____

Does any child on this form have an I.E.P.? Circle Yes or No - Child's Name _____
Please discuss with the DRE.

PER THE DIOCESE, IF YOUR CHILD HAS A FOOD ALLERGY THAT REQUIRES AN EPI PEN, YOU MUST COME TO THE OFFICE AND COMPLETE A FOOD ALLERGY ACTION PLAN. A PHOTO OF YOUR CHILD WILL BE REQUIRED TO ADHERE TO THE FOOD ALLERGY ACTION PLAN. YOUR CHILD WILL HAVE HIS/HER EPI PEN KEPT WITH THEM DURING RELIGIOUS EDUCATION CLASSES.

Does any child on this form require an EPI Pen? Circle Yes or No - Child's Name _____
Please discuss with the DRE.

Are there any orders of protection, custody issues, restraining orders? Circle Yes or No
If yes, which of these do you have? _____
Please discuss with the DRE

EMERGENCY CONTACT:

Name _____ Relationship to child _____ Phone # _____

Names & phone numbers of people allowed to pick up your child(ren)

Please check one: Child(ren) walks home _____ Child(ren) does not walk home (parent pick-up) _____

Photo/Video Permission and Release

I hereby grant permission, without reservation, to St. Raymond Parish, and to those authorized by St. Raymond Parish, to take photographs and to make recordings of my child(ren) on this form and to use them in original or modified form in all media now or hereafter known, (including, without limitation, websites, bulletins, newsletters and promotional brochures) with or without name or information, solely for the promotion, public education, and/or fundraising activities of St. Raymond Parish. I understand and agree that I am entitled to receive no compensation for the above. I release St. Raymond Parish, its officers, directors, agents, employees, independent contractors, licensees and assignees from all claims that I now have or in the future may have, relating to the above. I further agree that St. Raymond Parish will be the sole owner of all tangible and intangible rights in the abovementioned photographs and recordings, with full power of disposition. I am the parent or guardian of the children listed on the front of this form, and I hereby consent to the foregoing on behalf of the minor(s) and myself.

Child Lures Prevention Program: Think First & Stay Safe

In September 2018, when the CHILD LURES PREVENTION PARENT THINK FIRST & STAY SAFE GUIDEBOOK is distributed, I agree to read this book and discuss the topics in the book with my child. I understand that my child will receive safety training in Child Lures Prevention each year my child is enrolled in our parish Religious Education Program. I also understand that I am welcome to attend these sessions with my child.

PRINT NAME _____ SIGNATURE _____ DATE _____

CHILDREN'S CHRISTMAS PAGEANT (GRADES 3-8) - SUNDAY 12/9/2018 - LOOK FOR SIGN-UP SHEETS!

NEW STUDENT (1ST GRADE – 8TH GRADE) – 2018/2019

ST. RAYMOND RELIGIOUS EDUCATION OFFICE

263 Atlantic Ave., East Rockaway, NY 11518

Tel: 516-593-9075/Fax: 516-593-1156 - econtaldisrre@optonline.net

ORIGINAL BAPTISMAL CERTIFICATE & FULL PAYMENT MUST BE PRESENTED AT THE TIME OF REGISTRATION (unless baptized at St. Raymond's Church – need exact date in order to verify with Rector)

Date : _____ Grade in Religion in September : _____

Child's Name : _____ Phone : _____

Address : _____ Town _____

Mother Cell #: _____ Father Cell #: _____

Mother Work #: _____ Father Work #: _____

PRIMARY E-MAIL ADDRESS (PRINT CLEARLY): _____

PRIMARY PHONE NUMBER (PRINT CLEARLY): _____

Public School : _____ Public School Grade in Sept: _____

Mother's Country of Origin _____ Father's Country of Origin _____

Mother's Maiden Name (first & last) : _____

Father's Name on Child's Baptismal Certificate (first & last) : _____

Mother's Religion : _____ Father's Religion: _____ Marital Status: _____ (Married, Single, Widowed, Divorced)

Main Language spoken at home: _____

If you are single or remarried parent, who has custody of this child? Mother ___ Father ___ Other Specify _____

Child's date of Birth: ___/___/___ City/State of birth _____ Sex : Male / Female

Date of Baptism: ___/___/___

Baptismal Church _____

Address of Church _____

City _____ State _____ Country _____ Zip _____

Previous Religious Education : _____

First Penance : Date : ___/___/___ Church : _____

First Communion : Date : ___/___/___ Church : _____

During Religious Education classes, in case of emergency and parent is not available, contact:

Name: _____ Relationship to child: _____ Phone: _____

SPECIAL CONSIDERATIONS: (i.e learning, developmental, hearing impaired, allergies, etc.)

Does your child have an I.E.P.? Yes or No _____ If yes, please speak to DRE

IF YOUR CHILD HAS A FOOD ALLERGY THAT REQUIRES AN EPI PEN, YOU MUST COMPLETE A FOOD ALLERGY ACTION PLAN AND DISCUSS THE SITUATION WITH THE DRE. A PHOTO OF YOUR CHILD WILL BE REQUIRED TO ADHERE TO THE FOOD ALLERGY ACTION PLAN. THIS PROCEDURE IS A DIOCESAN RULE. YOUR CHILD WILL HAVE HIS/HER EPI PEN WITH THEM DURING RELIGIOUS EDUCATION CLASSES.

Does your child require an EPI pen? Yes or No _____ If yes, please speak to DRE

Orders of protection, restraining orders or custodial issues? Yes or No _____ If yes, please speak to DRE.