

The Quincy Catholic Collaborative of ST. MARY ♦ SACRED HEART ♦ ST. ANN

RELIGIOUS EDUCATION PROGRAM 2019-2020

Please check the parish in which you are registered: St. Mary Sacred Heart St. Ann

A copy of a baptismal record is REQUIRED when registering new students who were not baptized at St. Mary, St. Ann, Sacred Heart or Star of the Sea. **Please fill in both sides of the registration form. Print neatly.**

FAMILY INFORMATION

Parent 1: _____
FIRST MIDDLE INITIAL LAST (MAIDEN) RELIGION

WORK PHONE CELL PHONE

Parent 2: _____
FIRST MIDDLE INITIAL LAST (MAIDEN) RELIGION

WORK PHONE CELL PHONE

Address: _____
NUMBER STREET CITY ZIP

Contact: _____
HOME PHONE * HOUSEHOLD EMAIL (**required** - this is our major mode of communication)

Emergency Contact: _____
NAME PHONE

Student lives with: Parents Mother Father Guardian

GUARDIAN NAME

SESSIONS

Grades 1-6 St. Mary
Sundays, 9:15-10:15 AM at St. Mary Hall

Grades 1-6 Sacred Heart
Sundays, 8:45-9:45 AM at QCA

Grades 1-6 St. Ann
Sundays, 10:45-11:45 AM at QCA

Middle School Grades 7-8
every Wednesday
6-7 PM at St. Ann Hall

Confirmation Grades 9 & 10
every other Sunday
12-1 PM Sept.-Apr.
at St. Ann Hall

TUITION

\$75 for the first student
\$125 for two students in same family
\$150 for three or more students in same family

Please make your check payable to your home parish and mail to:

Religious Education Office
757 Hancock Street
Quincy, MA 02170

MINISTRY ASSISTANCE

Faith Formation is an ongoing process involving the entire family. We are always in need of assistance. Please indicate the areas in which you may be able to assist in this ministry. We will be sure to use your talents at the same day and time as your child/children.

- Full-time Catechist**
I would like to teach grade _____
(Full-time catechists do not pay tuition)
- Assistant Catechist**
I would like to teach grade _____
(Full-time parent help in the small groups do not pay tuition)
- Substitute Catechist**
- Hall Monitor**

STUDENT 1Name: _____
FIRST MIDDLE LAST

BIRTHDATE GENDER GRADE AS OF SEPT 2019 SCHOOL NAME

Sacraments Received: Baptism Eucharist Reconciliation ConfirmationDate & Place of Baptism: _____
DATE CHURCH TOWN STATEDate & Place of First Communion: _____
DATE CHURCH TOWN STATE

Special Needs: _____

Place of Previous Religious Education Classes: _____ Grades Attended: _____

STUDENT 2Name: _____
FIRST MIDDLE LAST

BIRTHDATE GENDER GRADE AS OF SEPT 2019 SCHOOL NAME

Sacraments Received: Baptism Eucharist Reconciliation ConfirmationDate & Place of Baptism: _____
DATE CHURCH TOWN STATEDate & Place of First Communion: _____
DATE CHURCH TOWN STATE

Special Needs: _____

Place of Previous Religious Education Classes: _____ Grades Attended: _____

STUDENT 3Name: _____
FIRST MIDDLE LAST

BIRTHDATE GENDER GRADE AS OF SEPT 2019 SCHOOL NAME

Sacraments Received: Baptism Eucharist Reconciliation ConfirmationDate & Place of Baptism: _____
DATE CHURCH TOWN STATEDate & Place of First Communion: _____
DATE CHURCH TOWN STATE

Special Needs: _____

Notes:

Place of Previous Religious Education Classes: _____ Grades Attended: _____

Office use only

Payment Information:

Installments	Amount	Check #	Cash	Date
1 st				
2 nd				
3 rd				

Total Amount Due:

\$ _____