2022-2023 BAYONNE RELIGIOUS EDUCATION REGISTRATION FORM

For the Parishes of:

BI. Miriam Teresa Demjanovich 326 Avenue C

326 Avenue C (201) 437-4090 **St. Henry** 82 West 29 St. (201) 339-0319 **St. John Paul II** 39 East 22 St. (201) 339-2070

St. Vincent de Paul 979 Avenue C (201) 436-2222

<u>IMPORTANT</u> - Please clearly print all information.

Circle one

YES ___ NO ___ Parent/Guardian Signature: ___

social media sites.

- All registration forms are due to the parish where your family is registered no later than September 9, 2022.
- All families of our Religious Education programs must be registered at one of the parishes in Bayonne.

PLEASE INDICATE THE PARISH AT WHICH YOUR FAMILY IS REGISTERED: (Circle One)

Bl. Miriam Teres		ch Parish S	our FAMILY IS RE St. Henry Parish		<u>ED</u> : (Circle Oi John Paul II	,	St	Vincent de Paul Parish
parishes. Please family is registed Please indicate w	note, the Sacered. For more which parish and		Holy Communion er to the Family Ha e your child would li	and Conf ndbook.	firmation are	only cele		ce at any of our four the parish where the
BI. Miriam Teresa Demjanovich Sun. AM (8:45-10:15 GR 1-6) Tues. PM (6:30-8 GR 7 & 8)		Sun. AM (8:4: Sun. AM (8:4 Sun. AM (8:3 Sun. PM (7:0	5-9:45 GR K-5) 5-9:45 RCIC) 0-9:30 GR 9) 0-8:00 GR 9) 00-5:00 GR 1-5)	St. John Paul IISun. AM (10:30-11:45 GR K-8)Sun. AM (10:30-11:45 RCIA)Tues.PM (6-8:30 Mass & Class 0			_	Vincent de Paul Sun. AM (8:40-9:50 GR 1-5 Mon. PM (6:45-8 GR 9) Tues. PM (6:45-8 GR 6-8)
CHILD'S INFOR	MATION:		Birth Date:		Male/Female	Birth Place:		
First Name Home Address:		Last Name			Circle One Home Pho	one:	City/State	Country
اما طلانده مینالد (ما	Street	Doth Dow	Town	Mathan	Overeda eve	-4- 0	andiana	
Child lives with (pl	ease circie one)	: Both Pare		Mother	·		uardian	-duration One day
School:		City	Grad	rade in September 2022: F			Religious	Education Grade:
Emergency Contact:				Phone#:			Relationship to Child:	
Sacraments Recei Baptism		Name	City	/State		Country		Date:
Penance	Church:		9.			,		Date:
	_	Name	City	/State		Country		
Eucharist	Church: _	Name	City	/State		Country		Date:
**NEW STUDENT	'S ONI Y [.] Pleas	e attach a copy of you	· ·		e sacraments re	•	this form	
Special Needs:	please circle if	f any accommodation and the strict of the st	ons are needed in t	he followi	ng areas			g braces, etc.)
*Autism Sp	ectrum Disord	er (Autism, Asperger	's Syndrome, etc.)	*Devel	opmental disa	bility	*Low v	ision / legally blind
*Behaviora	l / emotional d	isorder *O	ther (please specif	y):				
-		ucation at another pa	rish/Catholic school,	please ind	licate:			

(CONTINUED ON OTHER SIDE OF PAGE)

I give my permission to have my child's pictures published in a public newspaper, parish bulletin, and/or on the parish website and/or

Name

City

Date: ____

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PARENT/GUARDIAN'S INFORMATION:

MOTHER :	First Nama	((Maidan Nama) Religion:				
		Last Name						
	Work Phone #:							
FATHER:				D. F. C				
		Last Name		Cell Phone #:				
•				Work Phone #:				
GUARDIAN: If Applicable	First Name	Last Name		Religion:				
				Cell Phone #:				
				Work Phone #:				
Catechist (I Office Assis REGISTRATION D Religious Educa 1 c 2 c Religious Educa Religious Educa Co Please return thi	Lead Teacher) stant DATES/FEES tion Program fees a shild - \$75.00 if regis or more children \$12 tion Sacramental Pr conciliation/1st Con infirmation Preparati s Registration Form	Children's Liturgy of the control of the contro	if registered on 31st. \$150 if re vs: e preparation o – there will be r Parish Office wh	September 1st or later. egistered on September 1st or later. f both Sacraments per child in addition to program fees. no additional registration fees and no early discount. there your family is registered and to the attention of the				
				nildren. If you have difficulty with the registration fees of stered. All calls and requests for financial help will be				
MASS ATTEND		ottond Mass over Cunday a	nd on Haly Day	o of Ohligation				
	-	attend Mass every Sunday a	nd on Holy Day	's or Obligation.				
ADDITIONAL IN Is there any addi		nat we need to know about y	our child? Plea	ase specify in the space below.				