**SAINT PAUL’S**

**RELIGIOUS EDUCATION**

**2021-2022**

Welcome to St. Paul’s Religious Education Program!
We have exciting programs for the 2021/2022 year for all ages.

**Children’s Religious Education Classes**

The Religious Education program, available for all ages from pre-kindergarten through 6th grade, will continue

to operate under the post-COVID pandemic system. Beginning in October, we will have our home lessons packets

mailed to each family with everything included for instruction and activities. With the guidance of the Holy Spirit,

you will be able to invite Jesus into your homes and experience His Presence as you learn more about your faith. If

you have any questions regarding the Religious Education program this fall, please call the office,

or email Craig Cullity at ccullity@stpaulsphoenix.org.

**St. Paul Youth Group**

Due to the uncertainties brought forth by the COVID pandemic, the Youth Group remains temporarily

suspended. Its immediate renewal is under review, and any information will be posted as soon as possible.

**Adult Faith Study**

Due to the uncertainties brough forth by the COVID pandemic, Adult Faith Study remains temporarily

suspended. Its immediate renewal is under review, and any information will be posted as soon as possible.

***\*All Fees are to accompany the following registration form\****

**ADULT OPPORTUNITIES**

**(Check Box Below)**

**Adult Faith Study No Fee**

**RCIA No Fee**

**Adult Confirmation No Fee**

**Adult Parish Missions (Advent, Lent) No Fee**

**Summer Adult VBS Fee TBA**

**Adult Name Phone Cell E-Mail\_ Address**

**City \_State Zip\_**

**OFFICE USE ONLY**

**Total Paid $\_\_\_\_\_\_\_\_\_\_\_ Receipt # \_\_\_\_\_\_\_**

**Check #\_\_\_\_\_\_\_\_\_\_\_ Cash \_\_\_\_\_\_\_
Bal Owe $\_\_\_\_\_\_\_\_\_\_\_ Initial \_\_\_\_\_\_\_**

**Sacramental**

**Reconciliation Retreat**

**Confirmation Comments**

**First Eucharist Retreat**

**Scholarship
Catechist
Teacher
Teacher Aide**

**Office Assistant
Hardship**

**Other**

**Religious Education K-6th**

**(Check Box Below)**

**Family Formation with 1 Child $ 85.00**

**Family Formation with 2 or more Children $100.00**

**RETREAT FEES**

**(Check Box Below)**

**Confirmation only (grades 4 - 12) $ 25.00**

**First Reconciliation $ 50.00**

**Confirmation/Eucharist – Spring $ 50.00**

**I would like to help defray the costs of Parish Time events.**

**Amount of donation $ (Please include with your registration fees.)**

**Father’s Name**

**Mother’s Name (w/ Maiden)**

**Address City State Zip**

**Hm. Phone Cell Phone E-Mail**

**Father’s Work Phone Mother’s Work Phone**

**Parents Are (Circle One): Married Separated Divorced Single Widowed**

**If Parents are Divorced List: Name/Phone/Address of Other Parent**

**St. Paul’s is a great community because of you! What gifts can you share?**

**Please see Volunteer Opportunities Sheet to sign up.**

***PLEASE DO NOT SEPARATE PAGES, YOU MUST COMPLETE AND RETURN ALL FOUR SHEETS TO BE REGISTERED.***

**PLEASE PRINT THE COMPLETE INFORMATION FOR EACH PERSON AND PLEASE CHECK APPROPRIATE BOXES THAT APPLY TO YOUR FAMILY.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Child’s First****Name Last** |  |  |  |  |
| **Sex—M/F** |  |  |  |  |
|  **Birth Date** **City & State** |  |  |  |  |
| **School Attending** |  |  |  |  |
| **Grade Level 2020-2021** |  |  |  |  |
| **Religious Education** |  |  |  |  |

**Please check which sacraments your child is eligible to celebrate in 2021-2022.**

**Children in second grade or above are eligible for First Reconciliation if they attended a Faith Formation program the previous year and are currently attending Religious Education.**

**Confirmation and First Eucharist candidates are eligible if they are in third grade or above, have participated in a Faith Formation program the previous year and are currently attending Religious Education.**

**I have read and understand the above statements concerning sacrament preparation.**

***parent/guardian signature***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Confirmation (only)****Grades 4-12** |  |  |  |  |
| **First Reconciliation** |  |  |  |  |
| **Confirmation /First****Eucharist** |  |  |  |  |

**Please give information for sacraments celebrated prior to 2021-2022**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Baptism Month/Year****Parish****City & State** |  |  |  |  |
| **First Month/Year Reconciliation Parish City & State** |  |  |  |  |
| **First Month/Year Eucharist Parish City & State** |  |  |  |  |
| **Confirmation Mon/Yr.****Parish****City & State** |  |  |  |  |

**St. Paul Roman Catholic Parish**

**PHOTO RELEASE: FOR ALL MINOR CHILDREN/TEENS**

I hereby grant my consent to use and release to: The Catholic Diocese of Phoenix and St. Paul Roman Catholic Parish the use of my minor child’s photo in the 2021-2022 St. Paul Roman Catholic Parish’s Faith Development Program without limitation or reservation of any fee. In the event our COVID pandemic precautions are lifted, we want to use pictures for slide shows at Parish Time, Religious Education, Youth Group, Upper Room Youth Group, Parish Calendar, Web Site, and Social Media, including but not limited to Facebook, YouTube, and Twitter.

No names will be printed.

Date

Print Parent/Guardian Name:

Parent/Guardian Signature:

Parish/Program: St. Paul Roman Catholic Parish Religious Education Program \_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_

City: State: Zip Code:

**VOLUNTEER SERVICES WITH THE COMMUNITY OF ST. PAUL’S**

***PLEASE CHECK THE BOX OR BOXES BELOW TO VOLUNTEER.***

**GENERATION EVENTS**

Parish Time Hospitality (Commitment: Monthly)

Coordinator of Volunteers for Special Parish Time Events such as:

VBS

Parish Picnic

**FORMATION**

***REGISTRATION FEES WILL BE WAIVED FOR ALL CLASSROOM VOLUNTEERS***

Teachers & Aides for K- 5th Grade R.E. (Commitment: Three times Monthly - Teacher Meeting/Catechist Training and Teach at R.E. Sundays AM)

Office Volunteer (Commitment: 2 to 8 hours one day a week)

**Diocese of Phoenix**

Safe Environment Training

**Permission Slip to Approve or Deny Safe Environment Training for children (K-12)**

**For Children For Children**

|  |  |
| --- | --- |
| **Name** | **Grade** |
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|  |  |
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|  |  |
|  |  |

|  |  |
| --- | --- |
| **Name** | **Grade** |
|  |  |
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|  |  |
|  |  |

**Approval of Children Attending Training:**

By signing below, I am giving permission for my child(ren) to attend the “Called to Protect for Children” Education Program.

Print Parent / Guardian Name Signature Date

**Denial of Children Attending Training:**

By signing below, I am indicating that I do not give my child(ren) permission) to attend the “Called to Protect for Children” Education Program.

Print Parent / Guardian Name Signature Date