

**ST. PETER'S CHURCH
2016 – 2017 RELIGIOUS EDUCATION REGISTRATION FORM**

Welcome to our Religious Education Program! It is our privilege to assist you and your children on the continuing journey of faith. The formal religious education of our children is meant only to be an extension of the religious training already being taught in the home. Teaching children for an hour on Sunday is not sufficient to teach our children the value of their beautiful Catholic Faith. Regular attendance at Mass and reception of the Sacraments is vital and a parent's responsibility as promised at your child's Baptism. A parent's example and his/her attitude about church and CCD is the best teacher for children. Children are expected to attend all classes, be on time, and act in a respectful manner to their teachers and all other children in the program. It is up to you, as parents, to provide a daily commitment to God by practicing the gift of faith and setting an example for your children. Our efforts will not be effective unless they are combined with your efforts. We look forward to another year of sharing in your child's journey of faith.

**CCD CLASSES ARE HELD ON SUNDAY MORNINGS FROM 11AM - 12:05PM,
IN THE ST. PETER'S SCHOOL AND IN THE ANNEX.
THE SCHEDULE FOR THE 2016-2017 SCHOOL YEAR IS AS FOLLOWS:**

September 11, 18, 25	December 4, 11, 18, 25	March 5, 12, 19, 26
October 2, 9, 16, 23, 30	January 8, 15, 22, 29	April 2, 9, 16, 23, 30
November 6, 13, 20, 27	February 5, 12, 19, 26	May 7 (Last Class)

(Classes will not be held on the following dates: 11/27, 12/18 12/25/16. 1/1/17, 4/9,4/16)

Please keep this section for CCD schedule and detach and return the bottom portion along with registration fee of \$20/family either in the collection basket or to the rectory during office hours. Thank You!

All new & returning families must complete a registration form & return it signed by a parent/legal guardian before 9/7

Father's Name _____	Mother's Name _____
Address _____	Address _____
City, Zip Code _____	City, Zip Code _____
Phone (H) _____ (C) _____	Phone (H) _____ (C) _____
E-mail address: _____	

Emergency Contact - In the event of any emergency, if you are unable to reach me during the CCD hour, please contact the following:

Name: _____ Phone: _____ Relationship: _____

We currently use the SchoolReach program to notify families of class cancellations or changes in the CCD program. We will use the home phone number to contact you unless otherwise indicated here: _____

Student's Full Name	Age	Grade	Baptized	School Attending
_____	_____	_____	yes/no _____	_____
_____	_____	_____	yes/no _____	_____
_____	_____	_____	yes/no _____	_____
_____	_____	_____	yes/no _____	_____

Do any of the children who are enrolling have any special needs that we should be aware of? (It is essential that we make teachers aware of any special concerns. This information is confidential and given only to the child's teacher).

Parent/Guardian Signature & Date: _____

Please return this form with registration fee to the Rectory before September 7th.