

*Church of the Holy Spirit Religious Education*

*Registration 2017-18*

1969 Crompond Road, Cortlandt Manor, NY 10567-4113 914-734-9243

re\_holyspiritchurch1969@verizon.net

Family Last Name \_\_\_\_\_

Primary Phone Number for Communication \_\_\_\_\_

Primary E-mail for Communication \_\_\_\_\_

Address \_\_\_\_\_

Street Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Every family should be registered with a Parish. If you are not already registered at Holy Spirit, would you like us to mail you the Parish Registration Form? \_\_\_\_\_

Father \_\_\_\_\_

Father's Religion \_\_\_\_\_ Father's Home Phone \_\_\_\_\_

Father's Work Phone \_\_\_\_\_ Father's Cell Phone \_\_\_\_\_

Mother (include Maiden Name) \_\_\_\_\_

Mother's Religion \_\_\_\_\_ Mother's Home Phone \_\_\_\_\_

Mother's Work Phone \_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone Number \_\_\_\_\_

Child's Full Name \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Child lives with \_\_\_\_\_

Grade September 2017 \_\_\_\_\_ School September 2017 \_\_\_\_\_

Please let us know about any learning needs (ie: ADHD or learning accommodations) and/or any medical conditions/allergies so we can best work with your child \_\_\_\_\_

Check which Sacraments have been received: Baptism \_\_\_\_\_ First Penance \_\_\_\_\_ First Communion \_\_\_\_\_

Child's Full Name \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Child lives with \_\_\_\_\_

Grade September 2017 \_\_\_\_\_ School September 2017 \_\_\_\_\_

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To register additional children, please download an additional registration form at [www.holyspirit-cortlandtmanor.org](http://www.holyspirit-cortlandtmanor.org).

Please check which session you would prefer, noting first, second and third choices.

Session	First Choice	Second Choice	Third Choice
Tuesday 4:30 to 5:45			
Tuesday 6:30 to 7:45			
Wednesday 4:30 to 5:45			
Wednesday 6:30 to 7:45			
Thursday 4:30 to 5:45			

**Fees for the 2017-18 Year**

*Fees must be paid at time of registration.* You may make your payment by check made payable to Church of the Holy Spirit or cash.

*Register before June 30, 2017 and save \$25!*

Early Registration Fee (before June 30): \$200 for the first child; \$70 for each additional child  
 Registration Fee after July 1: \$225 for the first child; \$70 for each additional child

Sacramental Fees (due the year the child is receiving the Sacrament):

First Penance and First Communion \$50 (second grade); Confirmation \$100 (eighth grade)

Media Release: We may take photographs during classroom time or group activities. These photos may be used for the Parish website, posted in the PAC, etc.

Do you give permission to take photos? Yes \_\_\_\_\_ No \_\_\_\_\_

Please consider using your talents and gifts to serve in our Religious Education Program:

I/We would like to volunteer in the following areas:

- |                                    |  |
|------------------------------------|--|
| _____ Catechist (Teacher)          | _____ Catechist’s Assistant                    |
| _____ Work one-on-one with a child | _____ Substitute Catechist                     |
| _____ Help plan family events      | _____ Help with hospitality                    |
| _____ Donating supplies            | _____ Office Work                              |
| _____ VBS—Maker Fun Factory        | _____ Pray for our Religious Education Program |

Office Use: No _____ Date _____ Amt Due _____ Amt Paid _____ Check No _____
Other _____ Class List _____ PS _____ Sac Prep _____ EM _____