

St. Mary's Religious Education Registration

2016-2017

Grades 1st -8th

Please Print

Family Name _____ Phone _____

Mailing Address _____
(Street) (City) (Zip)

Title: Dr. Mrs. Ms. _____

Mother's Name _____ (W) Phone _____ (C) _____

Mother's Maiden Name _____ Religion _____

Title Dr. Mr. _____

Father's Name _____ (W) Phone _____ (C) _____

Religion _____

Stepparent/Guardian's Name _____ Religion _____

Address _____ Phone _____

Child resides with _____

Number to call in Case of Emergency Name _____ Phone _____

Family E-Mail _____

PLEASE PRINT LEGIBLY

Child's Name	M/F	DOB	Grade	Bapt.	Sacraments Received (Please Check)		
					Recon.	Com.	Conf.
1) _____	---	-----	---				
2) _____	---	-----	---				
3) _____	---	-----	---				
4) _____	---	-----	---				
5) _____	---	-----	---				

Please list child's name and grade and allergies or special problems of which we should be aware:

Family Name _____

Fees: Active Registered Families

1 Student \$40.00 ___ 2 Students \$50.00 ___ 3 Students \$60.00 ___ 4 or more \$70.00 ___

First Communion Fee \$35.00 _____ Confirmation Fee \$35.00 _____

Late Fee \$10.00 (registration after & Gdya V 2016) _____

TOTAL _____

If these fees are a burden to anyone please notify the Religious Education Office.

Parent Volunteer

Teacher ___ Team Teacher ___ Substitute Teacher ___ Computer Skills ___

Assist in the RE Office on Wednesday Evening ___ Help with carpool line

Help with receptions: Holy Communion ___ Confirmation ___

Door Monitors Artistic Ability or Calligraphy ___ Sewing ___

Parish Policy on Active Membership

Being registered in the parish for a sufficient period of time

Faithful attendance at Mass on Sunday and Holy Days

Use of the envelope system in the financial support of our parish. Envelope # _____

Photograph/Press Release: I realize that photographs, videos, written extractions, and voice recordings of program participants may be taken during various activities for the purpose of illustrations, publications, and website.

I hereby authorize and give full consent to **St. Mary's Religious Education Program** to publish and copyright all photographs, videos, written extractions, and voice recordings in which my child appears while enrolled as a participant in the Religious Education 2016/2017.

I do not consent to the photographs, videos, written extractions, and voice recordings release.

Office use only

Fee Paid _____ Check # _____ Cash _____

Sacramental Fee Paid \$ _____

To: Parents
From: St. Mary's Religious Education Program
Subject: Opportunity to "Attend" or "Opt Your Child Out" the **Protecting God's Children, Touching Safety Program** This Program Is Different Every Year
Date: Fall 2016

I will need every parent to read over the following information and make every effort to attend the program mentioned below or opt-out.

St. Mary's Religious Education will present a sexual abuse prevention program. The **Protecting God's Children, Touching Safety Program** will be offered to our students on Wednesday, 5 October 2016, at 6.00pm - 6.30pm meet in Gallivan Hall and a make-up date of Wednesday, 19 October 2016 at 6.00pm - 6.30pm meet in Gallivan Hall. Religious Education class will follow as usual from 6.30pm to 7.30pm. The creators of the Protecting God's Children program developed the Touching Safety program. This program is provided to us by the Diocese of Charleston as a part of our ongoing effort to help create and maintain a safe environment for children.

The scheduled lesson is being offered to all students in St. Mary's Religious Education Program. We encourage you to read the "Overview" and "Lesson plan" on our website at www.stmarysgvl.org, under Catechesis/**Religious Education** program, so you'll be aware of the nature of the Touching Safety program. After reviewing the materials you may decide to either attend or opt-out of the program. If you have questions about the program or the lesson, please contact Joann Miller at 864.679.4110. **All "opt-out" forms must be returned with your registration form.**

You must remember that the number of students in RE has to equal the number attending the program or opting out. **It is very important that you return this form.**

Please do not hesitate to call me at the above phone number if you have additional questions.

You must return this form with Religious Education Registration Form.

Yes, my child/children will attend one of the above classes offered.

If yes, please check one 5 October 2016 or make-up date 19 October 2016

Yes, our family chooses to Opt-out of the **Protecting God's Children, Touching Safety Program.**

Please print your child/children names:

- | | |
|----------|----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |
| 5) _____ | 6) _____ |

Parent's name (printed): _____

Parent's Signature _____ Date _____

What to view when you go to:

www.stmarysgvl.org

Click on Catechesis, then
click on Protecting God's Children, Touching Safety Program

Please view:

- 1) **Founding Principles & Description of the Program**
- 2) **Teaching Touching Safety Guide**
- 3) **Lesson plans for your families' grade level**

Lesson Plan Materials for Grades K through 2

Lesson Plan Materials for Grades 3 through 5

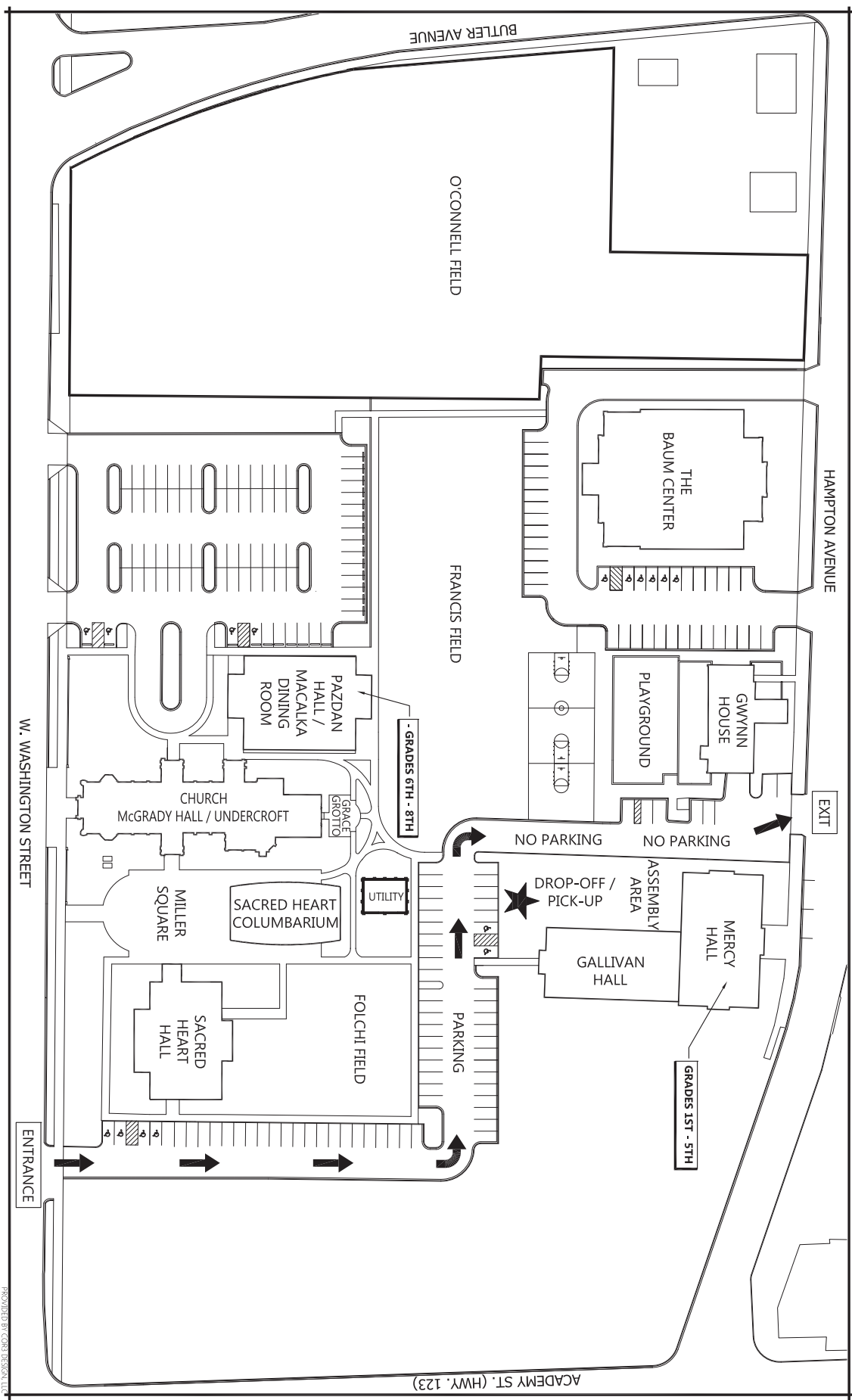
Lesson Plan Materials for Grades 6 through 8

All lessons are available in Spanish on the website.

___ Yes, I have looked at the material online and have signed page 3 of
the Registration form.

___ No, I would still like to have a copy of the Protecting God's Children, Touching Safety
Program sent home the first week of school, but I have signed page 3 of the Registration
form.

**SAIN'T MARY'S RELIGIOUS EDUCATION
DROP-OFF & PICK-UP**



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