



St Joseph Parish
173 Albion St, Wakefield MA 01880
Phone: 781.245.5770

OFFICE USE ONLY

Religious Ed Registration Form

Registration Deadline August 31st

Family Last Name: _____
 Father's Name: _____
 Father's Email: _____
 Father's Cell Phone (SMS): _____
 Home Address: _____

Home Phone: _____
 Mother's Name: _____
 Mother's Email: _____
 Mother's Cell Phone (SMS): _____
 Primary Email: _____

Child's First Name	Last Name	Date of Birth	Gender	Grade Entering Fall 2018	Tuition Cost See below	Special Needs/Allergies	Baptized?	Baptismal Parish and City	First Communion?
			M/F				Y/N		Y/N
			M/F				Y/N		Y/N
			M/F				Y/N		Y/N
			M/F				Y/N		Y/N

Religious Education Class Selections—More details available on our website www.stjosephwakefield.org

Grades 3 to 6 Home School Program-PLEASE REGISTER
 Every Child in Grades 3 to 6 is Home Schooled. Parents complete the curriculum at home and schedule how and when they will teach the faith. In addition, parents attend six (6) monthly Adult Faith Formation Meetings from October to April to complete the home school curriculum. *Workbooks are \$20.00 each. NO CHARGE for program.*

Optional Weekly Junior Youth Group Programs—\$40/Child
 Children come together to share, learn and discuss their faith through prayer, praise & worship, reading the Bible, music, crafts, and movies.

Grades 3 & 4
 Meet WEDNESDAY 3:30-4:30 p.m.

Grades 5 & 6
 Meet TUESDAY 3:30-4:30 p.m.

Required Programs—Schedule and Class Times Choices

Grade 1 Six SATURDAYS 10:00-11:00 a.m. **\$35/Child**

Grade 2—Number 1-4 in order of Preference **\$60/Child**
 WEDNESDAY 4:30-5:15 p.m. _____ 5:30-6:15 p.m. _____
 THURSDAY 3:30-4:15 p.m. **FULL** 4:30-5:15 p.m. **FULL**

Grade 7—Number 1-3 in order of Preference **\$40/Child**
 MONDAY 3:30-4:25 p.m. **FULL** 4:30-5:25 p.m. **FULL** 5:30-6:25 p.m. _____

Grade 8 -Number 1-2 in order of Preference **\$40/Child**
 TUESDAY 4:30-5:25 p.m. _____ 5:30-6:25 p.m. _____

Grade 9 SUNDAY 6:45-8:00 p.m. **\$100/Child**
 Covers cost of program, Confirmation Retreat and Robe Fee

Due: \$ _____ Paid: \$ _____ Cash/Check No.: _____

____ Initial here if you do not want your child(ren) photographed or videotaped during RE Classes.