



GROWING IN FAITH TOGETHER

A Religious Education Program at St. Anthony of Padua Church
helping children in K ~ 6th grades learn more about their Catholic faith.

*NOTE: 6th graders may either choose the GIFT-Religious Education Program or the EDGE Jr. High Youth Group

Student Sessions:

Sunday 3:30 to 4:45 p.m.
Beginning Oct. 3, 2010

or

Tuesday 6:30 to 7:45 p.m.
Beginning Oct. 5, 2010



TUITION & FEES

REGULAR REGISTRATION DEADLINE IS SEPTEMBER 21, 2010

REGULAR REGISTRATION FEE UNTIL SEPTEMBER 21, 2010		LATE REGISTRATION FEE AFTER SEPTEMBER 21, 2010	
1 CHILD	\$65.00	1 CHILD	\$85.00
2 CHILDREN (SIBLINGS)	\$85.00	2 CHILDREN (SIBLINGS)	\$105.00
3 CHILDREN (SIBLINGS)	\$110.00	3 CHILDREN (SIBLINGS)	\$130.00

ADDITIONAL SACRAMENT FEE

ADD A \$25.00 SACRAMENT BOOK FEE FOR EACH CHILD IN THEIR SECOND YEAR OF PREPARATION FOR SACRAMENTS

IMPORTANT DATE

MANDATORY PARENT ORIENTATION AND SAFE ENVIRONMENT SESSION DURING YOUR CHILD'S CLASS ON: OCT. 17TH FOR SUNDAY SESSIONS OR OCT. 19TH FOR TUESDAY SESSIONS

REGISTRATION PROCESS

Read and fill out all attached forms and **return before September 21, 2010.**

All children are accepted unless otherwise notified and must attend first class.

It is very important to turn in your registration early to assure a book for each student. Class space is limited.

THIS PACKET MUST BE COMPLETELY FILLED OUT OR IT WILL DELAY YOUR CHILD(REN)'S REGISTRATION.

PLEASE NOTE: NO REGISTRATIONS WILL BE ACCEPTED ON THE FIRST DAY OF CLASS!

CLASS LISTS WILL BE POSTED AROUND THE SCHOOL ON THE FIRST DAY

Forms and Fee

may be mailed to:

St. Anthony of Padua Church

Attn: Religious Education

5770 N. Maroa Ave.

Fresno, CA 93704

DO NOT MAIL CASH

Checks payable to:

*"Let the little children come to me, and do not hinder them, for the kingdom of heaven belongs to such as these."
Matthew 19:14*



Contact

Information: Mary Socorro Briseño

Director of Religious Education

439-0124 ext. 119

email: mbrisenostanthonyfresno.org

Sunny George

Religious Education Secretary

439-0124 ext. 113

email: sgeorge@stanthonyfresno.org

ONLY FOR SECOND YEAR OF SACRAMENT PREPARATION: RECONCILIATION AND FIRST COMMUNION OR SACRAMENTS OF INITIATION

These sacrament classes are only open for students who have completed their first year of Religious Education.

Students who wish to receive sacraments must attend Religious Education classes consecutively for two years

(1st – 6th grade) here at St. Anthony's or at another Catholic Church. During the second year of instruction

(2nd – 6th grade), students and parents are required to attend **12 additional Thursday classes from 6:30 – 7:45 pm.**

Please refer to Thursday calendar for scheduled Thursdays from October – March.

First class is **THURSDAY, OCTOBER 21st**. These sessions focus on the sacraments and are designed to reinforce what the children are learning in class. An additional book fee of \$25 per child for Reconciliation and Eucharist books is due with registration fee. **STUDENTS MUST HAVE SACRAMENT BOOKS BY THE FIRST CLASS MEETING.**

Please include a copy of your child's baptism certificate, if not baptized, provide a copy of birth certificate.

PLEASE KEEP THIS PAGE FOR YOUR INFORMATION

POLICY AND AGREEMENT

PLEASE KEEP THIS INFORMATION FOR YOUR RECORDS

All children's safety is important to us, and in order to alleviate potential arrival and departure problems, your cooperation is needed in the following areas:

- **SAFETY ZONE**: This area is reserved for everyone to walk safely into the school. **NO PARKING, NO DRIVING, AND NO STUDENT DROP-OFF OR PICK UP IS ALLOWED IN THIS CONED AND/OR BLOCKED AREA.**
- **BE PROMPT**: Children are to arrive no earlier than **10 minutes** before class time since there is **no supervision**. Also, remember that being late disrupts other students and teachers. It is your responsibility to **drop off and pick up on time**. There is no supervision after sessions. It may be dark when we finish, and **safety is our No. 1 priority**. If you are late, a call to your emergency number will be made. If it is longer than 15 minutes it may be reported to the proper authorities. **In case an emergency arises, and you cannot pick up your child in the first 15 minutes after class is finished, you may call and leave a voice message at 439-0124 ext. 119.**
- **DROP OFF & PICK-UP FOR ALL GRADES**: A Parent/Guardian must **drop off and pick up each child in their classroom, and this adult must sign their child in and out**. Your child will need to wait in the classroom until you come and sign them out. This is for all of the students in kindergarten through sixth grade. It will only take a few extra minutes to park your car and pick up your child. This helps us ensure the safety of all the children and is part of safe environment.
- **AUTHORIZED PERSONS**: Children being picked up by someone other than the parent or guardian must have a written letter signed and dated by the parent/guardian with the names of those allowed to pick up the child. A copy of the letter will go on file in the Religious Education Office and one to the teacher. The original letter must be given to the Director of Religious Education. **A phone call will not be sufficient.**
- **BEHAVIOR**: We ask that students come to class ready to learn and participate. Disruptive or rude behavior ruins the lesson for everyone. Our time together is only for 75 minutes. We encourage parents to have children exercise and eat healthy (low or no sugar) **before** class so that they can focus more easily. If child is disruptive, they will be sent to the office after warning and parent may be notified. Disciplinary action may be required, and we retain the right to allow child to remain in our program. Please speak to your child about best behavior in class.

SACRAMENTS: Child(ren) must complete 2 continuous and entire years (1st–6th grades) of Religious Education at St. Anthony's or at another Catholic Church, and 12 ADDITIONAL SACRAMENT CLASSES along with their parent(s) before being able to receive sacraments.

- **SAFE ENVIRONMENT**: The Diocese of Fresno requires a mandatory yearly **Safe Environment session for parents or legal guardians and children**. Please plan to attend and check calendar for date to be held.

DIOCESAN FORMS: Each student is required to have a Diocese of Fresno Annual Parish Consent for Emergency Medical Treatment, Parish Activities Permission, and Release of Liability Form completely filled out, dated and signed by Parent/Guardian. Each student must have all forms completed in order to be admitted into class.



Growing in Faith Together
Kindergarten through 6th* Grade



*NOTE: 6TH GRADERS MAY EITHER CHOOSE THE GIFT-RELIGIOUS EDUCATION PROGRAM OR THE EDGE JR. HIGH YOUTH GROUP

TUITION & FEES		PAYMENT MUST ACCOMPANY REGISTRATION PACKET	CLASSES
1 CHILD:	\$65.00	Please Make Checks Payable to: ST. ANTHONY OF PADUA CHURCH OR HAVE EXACT CASH AMOUNT THIS PACKET MUST BE COMPLETELY FILLED OUT OR IT WILL DELAY YOUR CHILD(REN)'S REGISTRATION REGISTRATION DEADLINE IS SEPTEMBER 21, 2010 SEE FRONT COVER FOR LATE REGISTRATION FEES REGISTRATIONS WILL NOT BE ACCEPTED ON THE 1 ST DAY	___ SUNDAY: 3:30 – 4:45 p.m. or ___ TUESDAY: 6:30 – 7:45 p.m.
2 CHILDREN:	\$85.00*		MANDATORY FOR SECOND YEAR OF SACRAMENT PREPARATION
3+ CHILDREN:	\$110.00*		
*SIBLINGS NOTE: +\$25.00 PER CHILD (SACRAMENT BOOK FEE) ONLY FOR 2 ND YEAR OF SACRAMENT PREPARATION			

STUDENT INFORMATION *Please type or print clearly* IF MORE THAN 3 CHILDREN PLEASE FILL OUT ANOTHER FORM

	CHILD #1	CHILD #2	CHILD #3
NAME:			
GENDER:	MALE ___ FEMALE ___	MALE ___ FEMALE ___	MALE ___ FEMALE ___
DATE OF BIRTH:	___ / ___ / ___ AGE: ___	___ / ___ / ___ AGE: ___	___ / ___ / ___ AGE: ___
SCHOOL GRADE:	GRADE: ___ FALL 2010	GRADE: ___ FALL 2010	GRADE: ___ FALL 2010
CHILD LIVES WITH:	Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/>	Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/>	Mother <input type="checkbox"/> Father <input type="checkbox"/> Both <input type="checkbox"/>
SACRAMENTS <i>Please <u>only</u> indicate the sacraments that your child has received:</i>	BAPTISM: <input type="checkbox"/> YEAR ___ Parish: _____	BAPTISM: <input type="checkbox"/> YEAR ___ Parish: _____	BAPTISM: <input type="checkbox"/> YEAR ___ Parish: _____
	1ST RECONCILIATION: <input type="checkbox"/> YEAR ___ Parish: _____	1ST RECONCILIATION: <input type="checkbox"/> YEAR ___ Parish: _____	1ST RECONCILIATION: <input type="checkbox"/> YEAR ___ Parish: _____
	1ST COMMUNION: <input type="checkbox"/> YEAR ___ Parish: _____	1ST COMMUNION: <input type="checkbox"/> YEAR ___ Parish: _____	1ST COMMUNION: <input type="checkbox"/> YEAR ___ Parish: _____

FILL OUT INFORMATION BELOW ONLY FOR 2ND YEAR OF SACRAMENT PREPARATION

<i>This is my child's second year of religious education at St. Anthony of Padua Church</i>	YES <input type="checkbox"/> YEAR ___	YES <input type="checkbox"/> YEAR ___	YES <input type="checkbox"/> YEAR ___
	IF YES - A COPY OF YOUR CHILD'S BAPTISM CERTIFICATE MUST BE ATTACHED TO THIS FORM OR SUBMITTED TO THE RELIGIOUS EDUCATION OFFICE WITHIN 30 DAYS.		
<i>My child has attended religious education classes at another parish</i>	YES <input type="checkbox"/> YEAR ___	YES <input type="checkbox"/> YEAR ___	YES <input type="checkbox"/> YEAR ___
	PARISH: _____	PARISH: _____	PARISH: _____
IF YES - A COPY OF YOUR CHILD'S BAPTISM CERTIFICATE AND A VERIFICATION LETTER MUST BE ATTACHED TO THIS FORM OR SUBMITTED TO THE RELIGIOUS EDUCATION OFFICE WITHIN 30 DAYS.			

PARENT / LEGAL GUARDIAN INFORMATION *Please type or print clearly*

MOTHER'S FULL NAME:			
PH (H)	PH (C)	EMAIL:	
ADDRESS:		CITY:	ZIP:
FATHER'S FULL NAME:			
PH (H)	PH (C)	EMAIL:	
ADDRESS:		CITY:	ZIP:

YES, I would like to volunteer in the GIFT program Name: _____ Ph: _____

FOR OFFICE USE ONLY:

TUITION RECEIVED: \$ _____	<input type="checkbox"/> CK# _____ <input type="checkbox"/> CASH: _____ DATE: _____ BY: _____	POLICY/WEB FORM: <input type="checkbox"/>
FH-FORM: _____	CLASS: <input type="checkbox"/> SUNDAY <input type="checkbox"/> TUESDAY SACRAMENT CLASS: <input type="checkbox"/> THURSDAY	EMERGENCY FORM: <input type="checkbox"/>

POLICY AND AGREEMENT

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PLEASE READ AGREEMENT BEFORE SIGNING

I Agree with St. Anthony of Padua's Religious Education Program's Policy. I also understand and agree that if my child is in the second year of Sacrament Preparation, one or both parents and child must attend the 12 additional sessions required in order for my child to receive the sacrament(s) as stated in the Religious Education Program's written policy.

Signature of Parent _____ Date: _____

AUTHORIZATION TO PUBLISH PICTURES

I hereby grant permission to St. Anthony of Padua church to publish pictures of me and/or my child(ren) named on this registration form on to the church's web site, church's bulletin, and/or religious education program and GIFT newsletter. I understand that if I give notice to the director of religious education that I object to any particular picture of me or my child(ren) on the web site, it will be removed as soon as possible. I understand that neither I nor the child(ren) named on this registration form will be paid any royalty or other compensation for the publication of the pictures. Individual pictures of children will not be published and no names will accompany any photographs used on the web site.

I further state that I have the right to grant this permission as I am the child(ren)'s parent or legal guardian.

PARENT / GUARDIAN SIGNATURE: _____ DATE: _____

Please Note: By refusing to grant this permission, you the parent/guardian are responsible to inform the person taking pictures, and you are also responsible for keeping your child(ren) out of the pictures at our program's events.

DIOCESE OF FRESNO ANNUAL PARISH CONSENT FOR EMERGENCY MEDICAL TREATMENT, PARISH ACTIVITIES PERMISSION, AND RELEASE OF LIABILITY FORM

TO THE PARENT/LEGAL GUARDIAN: You must give permission on this annual form for your child to attend and participate in parish-sponsored events and activities during this calendar year. You will also be required to sign permission forms for your child to participate in specific parish-sponsored events, activities, and sports conducted off parish grounds.

Name of Child	Year <b style="text-align: center;">2010 – 2011
Name of Parent(s)/Guardian(s)	Parish Name <b style="text-align: center;">ST. ANTHONY OF PADUA

I, the undersigned parent or guardian, voluntarily wish to give permission for and request that my child be allowed to attend and participate in parish-sponsored events and activities during this calendar year including those conducted off parish grounds. My child is physically fit and capable of participation in parish events and activities. I agree to direct my child to cooperate and conform with directions, instructions, and rules given by parish personnel or agents, chaperones, or diocesan personnel responsible for all parish events and activities. If requested, I will sign a permission and release form for each specific event or activity conducted off parish grounds. I reserve the right not to have my child participate in parish-sponsored events.

I understand that participation in parish-sponsored events and activities, including those off parish grounds, involve some risk (including any travel to and from these events or activities) and that unforeseen events can occur. I am informed and agree that transportation, if involved, may be provided by parents, other private individuals, or commercial operators who are believed to be reliable and insured, but are not under the supervision or control of the parish.

In exchange for permitting my child to participate in the parish's activities, I waive and give up all claims (and the right to file a lawsuit) which I or my child (and our successors, heirs, and assigns) may have against the parish and Diocese of Fresno. I release and discharge the parish and Diocese of Fresno from all liability of responsibility from death, illness, personal injury, or property damage arising out of the parish activity and any transportation involved with the parish activity.

In the event of an emergency, and if the parish is unable to contact me, I authorize parish personnel or other adult leadership of a parish-sponsored event or activity, at my expense, to secure and consent to x-ray examination, medical, dental, or surgical diagnosis, treatment, and hospital care advised and supervised by a duly licensed physician, surgeon, or dentist. I expect to be contacted as soon as possible. I agree that if emergency medical or dental services are required for my child, the Diocese of Fresno will not be responsible to pay for any medical or dental expenses.

This permission, waiver, release, and consent applies to the parish named, and to the The Roman Catholic Bishop of Fresno (a corporate sole), the Diocese of Fresno, Diocese of Fresno Education Corporation, all Diocese of Fresno schools, all parishes, affiliated organizations, and their officers, clergy, agents, and employees.

This waiver and release form is signed in order for my child to participate in the parish's events and activities for my child's own personal enjoyment and benefit and is done so freely with full knowledge of the risk and dangers that are or may be involved,

I authorize any hospital which has provided treatment to the above named minor pursuant to the provisions of Family Code section 6910 to surrender physical custody of such minor to the diocesan or parish representative upon the completion of treatment. This authorization is given pursuant to Health and Safety Code section 1283.

Continued on reverse side.

The following information is provided for the benefit of the parish:

Daytime Phone Number(s) of Parent/Guardian	Nighttime Phone Number(s) of Parent/Guardian
Pager/Cell Phone Number(s)	Child's Date of Birth
Emergency Contact Other than Parent/Guardian	Phone Number(s)
Allergies (food, drugs, insects, etc.)	
Medications (name, dosage, reason)	
Other Information or Special Health/Physical Considerations (Attach extra sheet if necessary)	
Insurance Carrier	Insurance Group or ID Number
Name of Child's Doctor	Phone Number
Name of Child's Dentist	Phone Number
Name of Child's Orthodontist	Phone Number

I, the undersigned, have read this release and understand all of its terms. I request that my child be allowed to participate in the parish's events and activities. I execute this form voluntarily and with full knowledge of its significance. I have discussed the above with my child, and my child is aware of and understands the importance of following all rules set out for the parish's events, activities, or sports. A copy of this form shall be as valid as the original authorization and may be given to the adult leader of the events, activities, or sports.

Signature of Parent/Guardian: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

FOR OFFICE USE ONLY	
Date Release Received	Received BY