



Religious Education Registration

Registration Date _____

Child's Full Name _____
First Middle Last

Date of Birth _____ Age as of Sept. 1, 2023 _____ Girl ____ Boy ____

Place of Birth (city, state, country) _____
City State Country

School _____ Grade as of Sept. 2023 _____

Home Address _____
City State Zip Code

RELIGIOUS ED INFORMATION

Select one: ☐ First Time ☐ Re-registration ☐ Attended prior to 2022 ☐ Attended at other parish

Select one class day/time: ☐ Wednesday 4:30 – 6:00 PM ☐ Saturday 10:00 – 11:30 AM

Select one level from the options below:

<input type="checkbox"/> Pre-Communion level 1 (1st grade and up)	<input type="checkbox"/> Baptism & Pre-Communion Level 1 (up to 5 th grade)
<input type="checkbox"/> First Communion Level 2 (2nd to 5th grade)	<input type="checkbox"/> Baptism & Communion Level 2 (up to 5 th grade)
<input type="checkbox"/> Post Communion (3 rd to 5 th grade)	<input type="checkbox"/> Pre-Communion & Pre-Confirmation 1 (6th - 12th)
<input type="checkbox"/> Pre-Confirmation Level 1 (6th grade and up)	<input type="checkbox"/> First Communion & Confirmation 2 (7th - 12th)
<input type="checkbox"/> Confirmation Level 2 (7th grade and up)	<input type="checkbox"/> Baptism, Communion & Confirmation 1 (6th grade and up)
	<input type="checkbox"/> Baptism, Communion & Confirmation 2 (7th grade and up)

SACRAMENTAL INFORMATION

Sacrament	Date	Date	Parish Name	City, State, Country
Baptism	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Communion	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Confirmation	<input type="checkbox"/> Yes <input type="checkbox"/> No			

REGISTERED SIBLING INFORMATION

Complete the information below ONLY for siblings registered for the current year.

Sibling Name _____ Sibling Name _____

Sibling Name _____ Sibling Name _____

OFFICE USE ONLY

Payment Received ☐ Check # _____ Date _____ Received by _____

Notes _____

OTHER

Child is allergic ☐ Yes ☐ No If yes, list allergy _____

List any special medical conditions, prescribed medications, physical, medical or educational needs that apply to your child. _____

FAMILY INFORMATION

Child lives with: ☐ Both Parents ☐ Mother ☐ Father ☐ Other _____

Legal Custody: ☐ Both Parents ☐ Mother ☐ Father ☐ Other _____

Family is registered at St. Timothy? ☐ Yes ☐ No Parishioner # _____

Father's Name _____ Religion _____

Phone Cell _____ Phone Work _____

Email _____

Catholic ☐ Yes ☐ No Have you received the Sacraments ☐ Baptism ☐ Communion ☐ Confirmation

Do you want information to receive the Sacraments? ☐ Yes ☐ No

Mother's Name _____ Religion _____

Mother's Maiden Last Name _____

Phone Cell _____ Phone Work _____

Email _____

Catholic ☐ Yes ☐ No Have you received the Sacraments ☐ Baptism ☐ Communion ☐ Confirmation

Parent's Marital Status:

☐ Married in the Catholic Church ☐ Divorced ☐ Separated ☐ Single ☐ Widow

☐ Married Civilly only I want information for Catholic marriage preparation ☐ Yes ☐ No

Complete below, only if applicable.

Guardian's Name _____ Religion _____

Address _____

Phone Cell _____ Phone Work _____

Email _____

AUTHORIZED EMERGENCY CONTACT

List of persons (adults 21 years of age or older) authorized to pick up the child. If parents cannot be reached, these contacts will be called.

Contact Name	Cell phone number	Relationship to student

POLICIES AND GUIDELINES

Read carefully and initial agreement for each section.

- I. **Safe Environment Program:** The Teaching Touching Safety program is a tool designed to assist parents and teachers in this important task. This is a vehicle through which parents, teachers, catechists, and youth ministers **give children and young people the tools they need to protect themselves from those who might harm them**. Children in our Religious Education program receive two lessons a year in November 2024 at regular class time and/or during the Communion and/or Confirmation retreats. This is an audited program that is administered with assigned age-appropriate lesson plans. Parents may receive a guidebook and have an option to opt out. More Information <https://www.virtusonline.org>

_____ **Yes, I give my permission** for my child participation in the Safe Environment Program

_____ **No, I do not give my permission** for my child participation. (Please complete the "opt-out" form)

- II. **Photography/ Video Consent** (Refer to the Parent Handbook)

_____ I have read and understand the "Use of Photos" section of the Handbook, therefore giving permission for use of photos of my child. If not in agreement, I understand that I must communicate that to the DRE in writing prior to the beginning of the program year.

- III. **Consent for my child to receive religious education and the sacraments at St. Timothy Catholic Church.**

_____ When enrolling a student in the Religious Education Program at St Timothy Catholic Church, parents or legal guardians authorize his/her child/youth to receive the Sacrament(s) for which your child/youth is being prepared. **I affirm that I have all rights to give consent for my child to receive religious education and the sacraments at St. Timothy Catholic Church.** Unless the Parish is provided with a court order to the contrary, the person who enrolls the child at the Parish will be deemed to be the primary contact person for all faith formation program related issues involving the student.

- IV. **SUNDAY MASS ATTENDANCE:**

_____ ALL students in our Religious Education Program are expected to **regularly attend Mass every Sunday** and on Holy Days of Obligation.

- V. **Attendance.**

_____ Students are expected to attend class every week. Please email or call the Religious Education Office if a student will be absent from class. Please follow up with a note about the absence at the next class. Any child who is absent for a session must decide to pick up the missed work and return it the next session. I understand that my child can have up to **five (5) total absences per year (both excused and unexcused)**. Excess absences may require that a year be repeated before they can move up to the next level.

- VI. **Punctuality**

_____ Students are expected to arrive for class ON TIME. Lateness will be recorded and **excessive lateness may be recorded as "Absent"**. Late arrivals must come in with a parent and pick up a tardy pass. Any child who is tardy three or more times will count as an absent and will be asked to come in with their parents and meet with the CRE to work out a solution.

- VII. **Parents Handbook:**

_____ In order you might better understand the philosophy and requirements of St. Timothy Religious Education Program, it is important that you thoroughly read your copy of the **Rules and Regulations Handbook for St. Timothy Parish** Religious Education Program. More Information

<https://www.sainttimothycatholic.org/> I promise to read the rules and regulations in the handbook. If you disagree with any regulation, please communicate it in written.

VIII. Commitment:

_____ By signing this form, as the parent/legal guardian, I acknowledge that I accept and agree to follow and abide by all the rules and regulations as stated in the St. Timothy Parish Religious Education Program handbook. **I affirm that I have all rights to give consent for my child(ren) to receive religious education and sacraments at St. Timothy Catholic Church.**

Also, by signing below, I (We) certify that all information provided on the registration and payment form is true and correct. (I) We are the parents or authorized guardians of the child registered. I/we fully understand and agree to all the policies, payments, and consent to the enrollment of my child in St Timothy Religious Education Program.

I understand that incomplete registrations will not be processed. ALL new and returning students must bring copies of:

- ✓ For Baptism: Copy of Birth Certificate.
- ✓ For Communion: Copy of Birth and Baptist certificates.
- ✓ For Confirmation: Copy of Birth, Baptist, and Communion certificates.
- ✓ Transfer students: Bring a letter from their former parish stating years attended and levels completed.

Father's Signature

Mother's Signature

Father's Name

Mother's Name

Date

Date

Application taken by: _____

Date: _____ Time: _____

St. Timothy Catholic Church
Registration Form
5400 S.W. 102 Avenue Miami, Florida 33165
(ESPAÑOL AL DORSO)

Envelope/ Parish Number: _____

PLEASE FILL OUT APPLICATION NEATLY AND AS COMPLETE AS POSSIBLE

Family Last Name:	Home Phone:	Date:
Address:	Apt # / Unit #:	City:
Language Spoken at Home:	Marital Status: S M D W O	E-Mail:
Married at Catholic Church: Yes ___ No ___	Wife's Maiden Name:	Date of Marriage:

	Head of Household	Spouse	Child or Adult	Child or Adult	Child or Adult	Child or Adult
Name						
Male/Female						
Occupation						
Work Number						
Date of Birth						
Place of Birth						
Religion						
Baptized?	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:
First Communion?	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:
Confirmation?	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:	Yes / No Date:
Grade Level						
Name of School						

For Office Use Only:
 CCD: ____ Baptism ____ Marriage ____ Sponsor ____ Regular ____

For Office Use Only:
 Inputted Into the Computer by: _____ Date: _____