

# Saint Peters Catholic Church

Religious Education Office

406 Forman Avenue Point Pleasant Beach, NJ 08742

Phone: (732)-899-4839 Email: [religioused@saintpetersonline.org](mailto:religioused@saintpetersonline.org)

## 2023-2024 RELIGIOUS EDUCATION REGISTRATION FORM

At this time, we are only accepting St. Peter's Parishioner members to join our religious education program:

Is your family registered in our Parish?  Yes  No

Student's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Incoming Grade: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Gender: M \_\_\_ F \_\_\_

School Attending: \_\_\_\_\_

(Check one)  **GRADES 1-5 ONLY** Tuesdays from 4:00pm – 5:15pm

**GRADES 6,7,8 ONLY** Tuesdays from 5:30pm – 6:45pm

## Program runs - Tuesday Sept 26, 2023 – April 30, 2024

### FAMILY INFORMATION

**Best Home & Work Email Address:** \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  DECEASED

Maiden Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_  DECEASED

Home Phone \_\_\_\_\_ Mother's Cell \_\_\_\_\_ Father's Cell \_\_\_\_\_

Legal Guardian, *if different than above:*

Full Name: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

Address: \_\_\_\_\_

### PROMOTIONAL RELEASE

**Initial** \_\_\_\_\_ I also consent to the use of any videotapes and/or photographs in which my child(ren) may appear by the Diocese of Trenton and/or parish. I understand that these materials are being used for promotion of parish Religious Education programs and/or activities, which may include recruitment and fundraising efforts.

**Parent/Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**TUITION FEE: \$150.00 1st child/2 children \$250/3+ children \$300**

**There is an additional \$75.00 Sacrament Fee for 2<sup>nd</sup> and 8<sup>th</sup> grade students.**

Total payment enclosed: \_\_\_\_\_  Check (check # \_\_\_\_\_)  Cash

**HEALTH INFORMATION**

Does your child have...

Learning Disability - Please Describe:

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Medical Conditions - Please Explain:

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Other - Please Explain:

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Are there any other special instructions? (*i.e., learning needs, dismissal, transportation, ect.*)

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Are there any custodial issues?  YES  NO If yes, please explain:

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**If YES, a copy of custodial agreement is required.**

Child resides with:  Father  Mother  Stepfather  Stepmother  Guardian

**PLEASE CHECK ONE BOX**

**Returning Student** SKIP TO NEXT PAGE

**New Student** FILL OUT INFO BELOW

**\*NEW STUDENTS ONLY\***

**Sacramental Record**

	Date	Church	Location
Baptism*	_____	_____	_____
First Reconciliation	_____	_____	_____
First Eucharist	_____	_____	_____
Confirmation	_____	_____	_____

\*Other: Baptized in another denomination

Profession of Faith: \_\_\_\_\_ Date: \_\_\_\_\_ Parish: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

***\*\*\*Please attach copy of Baptismal Certificate if not baptized at St. Peter\*\*\****

Parish/School attended last year for Religious Ed:

Name: \_\_\_\_\_ Town: \_\_\_\_\_

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**2023-2024 EMERGENCY CONTACT FORM**

Students Full Name: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

**Please indicate below the person to be contacted in the case of an emergency when the parent or guardian cannot be reached:**

A. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship to child: \_\_\_\_\_

B. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship to child: \_\_\_\_\_

C. Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship to child: \_\_\_\_\_

**Parent / Legal Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_