



St. Cassian Church: Religious Education Form 2016-2017



187 Bellevue Ave.

Upper Montclair, NJ 07043

973-744-2850

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Regina Sammon: *Catechetical Coordinator*

REGISTRATION FEE: \$160.00 for one child / \$190.00 for two children / \$220.00 for three or more
Checks should be made payable to St. Cassian Church.

1. You must be a registered member of the parish in order to enroll in the program.
2. Complete both sides of this form.
3. Use one form per child.
4. Please notify us of any changes in your child's information through out the year.

Deadline for registration is July 31st. There will be a \$25 late registration fee.
All classes will close at 20 students

PLEASE PRINT

Last Name _____ First Name _____

Street _____

City _____ ST _____ Zip Code _____

Home Phone _____ Cell: _____

Date of Birth _____ Place of Birth _____

School attending in September _____

Grade _____ Grade entering in the CCD program if different than school _____

All CCD Classes meet in St. Cassian School, 190 Lorraine Ave.

Indicate your preference for CCD Classes:
(PLEASE CHECK ONE)

All classes will be closed at 20 students

Grades 1-8 Sunday 10:15-11:15 AM _____

Grades 1-8 Thursday 4:00-5:00 PM _____

Grades 1-8 Tuesday 5:30-6:30 PM _____

Grades 6-8 Tuesday 7:00-8:00 PM _____

There will be a \$25.00 fee for switching classes after August 31st.

Please complete the reverse side of this form

Father's Name _____ /Religion _____

Mother's First and Maiden Name _____ /Religion _____

**All CCD information will be distributed through e-mail.
Please print clearly parent's e-mail**

Address 1. _____

Address 2 _____

THIS INFORMATION WILL BE SHARED WITH YOUR CHILD'S TEACHER

With whom does the child reside? _____

Special needs of which we should be aware? _____

Any medical conditions of which we should be aware? _____

Any food allergies? _____

**The success of our program will be greater with your help.
Could you volunteer your time in any of the following?**

Classroom teacher _____ Day _____ Grade _____

Substitute teacher _____ Day _____ Grade _____

Class parent _____

**First Grade and New Students Only
Baptismal Information**

**We must have a copy of the Baptismal certificate on file as it must be recorded in the
Sacramental Registries.**

Check if your child was baptized at St. Cassian: Yes _____ No _____

If no, a copy of the baptismal certificate must be provided to secure registration

Parent Signature

Date

**Please be advised that if your child does not return to our Religious Education program it
will be considered a termination. In order to re-enter the program, we will require proof
of attendance in another CCD program, otherwise your child will have to enter at the
grade level at which they left.**