

Last name _____

Saint Kenneth Parish

Family Religious Education Program (FRE) 2018-2019

Grades 1-6

Parent information

Mother's name _____ cell # _____ e-mail _____ (please print clearly) Father's name
_____ cell# _____ e-mail _____ (please print clearly)

Home Address: _____

Class Registration: **Monday 6:30-7:30** **Tuesday 6:30-7:30**

Student 1 Last Name _____ First Name _____

Date of Birth _____ Grade in fall 2018 _____

Please list any medical conditions, food allergies, physical limitations and or academic challenges below:

Student 2 Last Name _____ First Name _____

Date of Birth _____ Grade in fall 2018 _____

Please list any medical conditions, food allergies, physical limitations and or academic challenges below:

Student 3 Last Name _____ First Name _____

Date of Birth _____ Grade in fall 2018 _____

Please list any medical conditions, food allergies, physical limitations and or academic challenges below:

IMPORTANT: Your family must be registered in the Parish

**Tuition: \$80 for your first child plus \$25 for each additional child
(Please make check payable to Saint Kenneth Faith Formation)**

Photo Permission: I release Saint Kenneth parish of any and all liability and give permission to have pictures of my family/child on the Saint Kenneth web-site and in the church bulletin: (names will not be used) Yes No

Parent Signature _____ Date _____

*I have a child making their First Communion this year YES NO

*If you have a child making their First Communion please be sure to fill out a First Communion registration form.

**I have a child making Fourth Grade Reconciliation this year YES NO

**If you have a child making their Fourth Grade Reconciliation this year please be sure to fill out a Reconciliation registration form.

Office Use: Date _____ Amount Paid _____ Check/Cash _____

FRE Parents-

This year I would like to run the FRE sessions a little bit differently. It is important to follow through working in the textbook at home. During each session I would like to have the children move to a classroom by grade level and complete a review of the unit that would have been assigned the previous month. In order to accomplish this, I will need a volunteer for each grade level to take the children and do a quick review for about 20-30 minutes. All materials and plans would be provided.

Please indicate below if you would be willing to assist.

Grade	1	2	3	4	5	6
Monday	_____	_____	_____	_____	_____	_____
Tuesday	_____	_____	_____	_____	_____	_____

Thank you in advance.

**As catechists, you would need to submit a background check form (yearly)and attend a Protecting God's Children workshop (only once).

Name _____

Email _____

Cell Phone _____ Home Phone _____