

**BLESSED SACRAMENT
CATHOLIC CHURCH
FAITH FORMATION
2024—2025
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SCHEDULE**

Kinder- 6th Grade

- A. Tuesday 6:30 p.m.—7:45p.m.
- B. Wednesday 6:30p.m.—7:45 p.m.

C. Jr. High—7th Grade to 8th Grade

High School—9th to 12 Grade

Mondays 6:00 - 8:00p.m.

In addition to regular classes, mandatory Sacramental Preparation Sessions will also be held on Saturdays. Calendar of classes will be given on first day of class.

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REGISTRATION FEES

Fees are for children/youth in the same family. **Payment is expected at registration.** Payment plan is available if family is experiencing a financial hardship. **Fees are NON-refundable after September 1, 2024**

- 1 child.....\$100.00
- 2 children.....\$200.00
- 3 or more children.....\$250.00

SACRAMENTAL PREPARATION

Sacramental Preparation Material Fees are in addition to Registration Fees.

- 2nd—12th Grade\$25.00
- Jr. High Retreat.....\$100.00
- High School Retreat.....\$150.00

Additional fees may be asked for individual events, trips, etc. at time of event.

**PLEASE PRINT AND ENTER ALL INFORMATION CORRECTLY.
BIRTH CERTIFICATES AND BAPTISM CERTIFICATES ARE REQUIRED AT TIME OF REGISTRATION.**

DATE: _____ PARISH REGISTRATION # (ENVELOPE): _____ Returning Family? Yes / No

FAMILY LAST NAME: _____ Primary language spoken in the home: _____

Child lives with: Both Parents/Same Household Mother Father and Step-parent
Grandparents Other _____ (Custodial permission forms required)

Parent Marital Status: Married Single ?Divorced? Widowed? Co-habitation

Father's Last Name _____ Father's First Name _____

Father's Work # _____ Father's Cell Phone _____

Mother's Last Name _____ Mother's First Name _____

Mother's Work # _____ Mother's Cell Phone _____

Home Telephone _____ Primary Email Contact _____

Home Address _____
(Address) (City) (Zip)

Name and Signature of Person registering child: _____

Would you be interested in being a Catechist Classroom Aide Office Helper Anywhere Needed?

Child's First Name	Child's Last Name	School Grade	M/F	1st, 2nd or 3rd year	Select Session A/B/C		Sacrament Preparation
					1st choice	2nd choice	

Class Cancellation for A/B
Please select a session. In case a session is cancelled due to lack of students or catechists, your child will be moved to your 2nd choice.

Session Code
A. Tuesday 6:30p.m.—7:45p.m.
B. Wednesday, 6:30 p.m.—7:45 p.m.
C. Jr. High & High School
 Mondays 6:00 pm to 8:00 pm

Sacrament Preparation (use code)
BP=Baptism **R**=Reconciliation
E=Eucharist Only **C**=Confirmation Only
E/C= Eucharist & Confirmation
CMP=Completed

Blessed Sacrament Catholic Church Faith Formation Code of Conduct 2024-2025

As members of a Christian community, Christian behavior is to be modeled at all times.

All students, parents, guardians, parish staff, parish volunteers and visitors to the program are to abide by our Code of Conduct.

- ◆ LISTEN—When someone else is speaking please show respect by not interrupting or speaking while they are speaking. Follow directions given by parish staff or volunteers
- ◆ PARTICIPATE—Demonstrate your willingness to learn by participating in class activities. Students are expected to complete any homework assignments. Students and Parent/Guardians are expected to attend classes, practices or retreats and participate in group projects, including 20 hours of community service and or classroom activity. Participate in Campus Clean-Up Days AND Sunday breakfasts or sales to raise funds for the parish. Participate in the life of your parish.
- ◆ CELEBRATE—For the celebration of the Sacraments, Parents and candidates for Sacraments will attend all mandatory Parent/Candidate Sacrament Preparation Sessions and weekly Mass. Complete any required homework. If parents/children do not participate as required, it may result in the candidate not celebrating the Sacraments.
- ◆ COURTESY—Be kind and help classmates, catechists and parish staff. Students are to arrive for class on time and picked up in a timely manner. Arriving late to class is a disruption. Parents, please ensure that you arrive on time to pick up your child. The parish staff has the right and obligation to contact the local police if the child is not picked up within an hour. Five excused absences will be permitted per year.
- ◆ RESPECT—Show respect to the Clergy, Catechists, Parish Staff and classmates in how you act or speak to them. Students are to wear clothing appropriate to a Christian environment. Students, parents, guardians, parish staff and parish volunteers will be treated with respect and will treat each other with respect. Parents will address catechists and parish staff in a respectful manner.
- ◆ GOOD STEWARDS—Take care of church property, classroom materials and supplies. No food, chewing gum, drinks, electronic devices permitted in the classroom. Cell phones are permitted, but must be kept in pockets. No littering or vandalism of classrooms or church grounds. Pay all fees in a timely manner.
- ◆ PEACEMAKERS—**Bullying, name-calling, fighting, will not be tolerated and are grounds for dismissal of students. Adults are also asked to model Christian behavior and comportment when speaking to each other.**
- ◆ JR. HIGH and HIGH SCHOOL: Along with the other requirements, students in the Jr. High and High School Programs will model Christian behavior in any outings outside the parish grounds, always keeping in mind that they represent our parish at these events.

CLASSROOM MANAGEMENT: Classroom Conduct Rules are designed to protect all students as well as the parish representative and parish property. If a student does not follow the Code of Conduct, the Catechist or Director may speak to the parent/guardian about the behavior. If the misconduct is serious, the pastor will ask to speak to the parent about behavior and consequences of misconduct. Ongoing discipline problems may result in the dismissal from our program. NOTE: Engaging in physical fighting may be grounds for immediate dismissal from our program as well as contacting the local police department.

CODE OF CONDUCT AGREEMENT: I have reviewed the Code of Conduct with my child/children and we understand and agree that my children and I will abide by the Code of Conduct listed and what is being asked of us. I understand that if my child breaks any of the program rules, there are consequences to misconduct and it may result in a consultation with the Catechist, Director or Pastor of the parish. Depending on the severity of the behavior, misconduct may also result in my child being suspended or dismissed from the Faith Formation Program. If my child engages in physical fighting, the proper authorities may be contacted and I (the parent or Legal guardian) will be notified of all actions taken and/or advised to immediately pick up my child from the premises.

Date: _____

Signature of person (parent/guardian) responsible for the student/s registered in Faith Formation or Youth Group

BLESSED SACRAMENT CATHOLIC CHURCH FAITH FORMATION

MEDICAL RELEASE & GENERAL CONSENT FORM

(ALL INFORMATION WILL BE KEPT CONFIDENTIAL)

FILL OUT COMPLETELY:

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Student's Name _____ Grade _____

Please provide us with the names of people who are authorized to pick up your child for you and we will release the child to their care in the event that you are unable to pick up your child from Faith Formation Classes.

EMERGENCY CONTACT

In the event a medical emergency arises, and we are unable to contact you, please give us the name of persons who you designate as emergency contacts and who have your permission to act on your behalf for the wellbeing of your child.

I, _____, the parent/s of the child described above, and legally entitled to give this authorization, do grant the persons named below.

Name: _____ Phone: _____
Relationship to child: _____

Name: _____ Phone: _____
Relationship to Child: _____

Please list any known conditions we should be made aware of (Medical, Physical, Emotional, Behavioral, Allergies, Medications taken, etc). Does your child have an IEP?

I request the above named participant be allowed to attend church related activities with Blessed Sacrament Catholic Church. In the event of an illness or medical emergency, I request that the Director of Religious Education, the Youth Minister or their designated volunteer to obtain medical treatment for the student on my behalf or the additional emergency contact cannot be reached. I understand that I will not hold the Diocese of Phoenix, Blessed Sacrament Catholic Church or its employees responsible for accident or injury. I understand that all cost incurred will be my (parent or Legal guardian) responsibility. I also understand that if my student breaks any of the program rules, the proper authorities will be contacted and I (the parent or Legal guardian) will be notified of all actions taken and/or to immediately to pick up my child from premises.

Date: _____

Father's Printed Name _____ Father's Signature _____

Mother's Printed Name _____ Mother's Signature _____

FOR FAITH FORMATION OFFICE ONLY
Please Do Not Write in Space

Total Number of Children Registered

Kinder-6th Grade _____

Jr. High _____

High School _____ # _____

Registration Fees (Registration Fees split evenly between programs)

Kinder-6th Grade _____

Jr. High _____

High School _____

Sub-Total \$ _____

Sacramental Preparation Fees (fees are individually assessed per program)

Kinder-6th Grade \$25.00 X

Jr. High \$50.00 X

High School Retreat \$150.00 X

Sub-Total \$ _____

Registration Fees+ Sacrament Preparation Fees \$ _____

(Minus TEAM Disc. of Reg. Fees only (\$ _____))

Fees Due \$ _____ Fees Paid \$ _____ Balance: \$ _____

Paid in Full? Cash Check # _____ Visa Receipt# _____

Date: _____ Staff: _____

Notes: _____

PAYMENT PLAN
All information will be kept confidential.

Envelope Number: _____ Regular Envelope User: _____

Why are you asking for a Payment Plan? _____

I promise to make payments according to the following schedule.

Date	Amount Due	Amount Paid	Balance	Rec.#

promise to help with Breakfast Sales Campus Clean Up

Catechist/Aide Fiesta Fundraiser

Signature: _____ Date: _____

Signature: _____ Date: _____

The Finance Committee will authorize if a payment plan is accepted.

Pastor or Delegate Approval _____ Date: _____