## Saint Theodore, Port Murray, NJ Religious Education Program 2025-2026 Registration Form — Complete One per Child

Student's Full Name	e:	le one: MALE FEMALE					
Family Name (if diff	ferent than	students):					
Address:							
Home Phone:		Email (ob	oligated)				
Student's D.O.B.:							
Father's Full Name:			Religion:				
Mother's First & M	l <b>aiden</b> Nan	ne:	Religion:				
Child Resides With:	_ Both Pa	rents _ Father _ Mother _ Stepmo	ther _ Stepfather _0	Other			
Father's Cell Phone	#:						
Emergency Name/R	.elationship	o/Number:					
GRADE in Public School as of September 2025:							
YEAR in Religious	Education	n Program for September 2025:					
Does the student hav	ve any <b>Spe</b>	cial Needs (Physical, Learning Disal	bility, Food Allergy,	etc.)?:			
PLEASE PROVID	E COPIES	S OF THE FOLLOWING FOR NI	EW STUDENTS OI	R IF STILL OWED			
Sacrament	Year	Church	City/State	Certificate Attached			
Baptized:	†			YesNO			
First Penance	+			YesNO			
First Communion	†			YesNO			
PLEASE	DO NO	T WRITE IN THE BOXE	ES BELOW, FO	OR OFFICE USE ONLY			
Before August 17 <sup>th</sup>				Date Rec'd			
One Child: \$100   Two Children: \$180   Three Children: \$220   Additional Sacrament fee 2 & 8 grades \$50)				# of Children Degistered			
Additional Sacrame After August 17 <sup>th</sup>	ent fee 2 &	8 grades \$50)		# of Children Registered			
One Child: \$120	Two (	Fee Paid:					
Additional Sacram	ent fee 2 &						
Teachers/AIDES		Check # Cash:					
One Child: \$50	Two Ch						
Additional Sacrame	ent fee 2 &	8 grade \$25					
		anied by applicable tuition and supporting  I. If you have a hardship, please attach a le					

## Volunteer Form 2025-2026

PLEASE NOTE: ALL volunteers are required to have the following elements completed prior to the start of school: (Please check the boxes below if already completed.)

- () Completed Volunteer Application Form
- () Background check & fingerprinting () Protecting God's Children Session

## REQUIREMENT FOR PARENT/GUARDIAN: PLEASE INDICATE YOUR PREFERENCE BELOW:

<b>[]</b> (	Catechist	for a	ı Reli	gion	Class:
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**YEAR Preference to Teach:** 

You are agreeing to teach once a week from September to May. However, there is some latitude for your personal schedule because you will be assisted by an aide at all times. We are required by the Diocese to have two staff in every classroom at every session. Training is available if needed and you will be provided with opportunities for personal spiritual growth.

☐ Substitute Catechist:	
☐ Catechist Aide:	
*Fill in for Catechist if necessary.	
☐ Hall Monitor:	
Help monitor hallways in the building while classes are in session.	
☐ Parking lot Monitor	
Name:	_Phone:
E-MAIL:	<del></del>