

Returning Student

Church of St. John & St. Mary
2022- 2023 Religious Education Registration Form
Grades 1-8

NEW PROGRAM SCHEDULE

Grades 1 – 4

Monday - RBS and WO 3:45 - 4:45 pm
Wednesday – Grafflin: 3:45 – 4:45 pm

Grades 5 - 8

Tuesday -- Bell School: 3:00 - 4:00 pm
Thursday – Seven Bridges: 3:00 - 4:00 pm
Monday – 8th Grade 7:00-8:00 pm
(12 students must register to hold class)

**** PLEASE PRINT CLEARLY****

Student’s Last Name: _____ Student’s First Name: _____ M/F: ___ DOB: __/__/__ School: _____ Grade: ___

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Student’s Last Name: _____ Student’s First Name: _____ M/F: ___ DOB: __/__/__ School: _____ Grade: ___

Parent/Guardian Name(s): _____ Primary Phone Number: _____

Primary Mailing Address: _____
Street City State Zip Code

Preferred Email Address for Rel. Ed./ Parish Information: _____

* Please contact us if there is any additional information that you wish to share about your child.

Tuition Fees: 1 Child: \$375.00 2 or More Children: \$400.00 Holy Communion Sacramental Fee: \$75.00

Payment Options: Completed Registration, Emergency Forms, and payment are required before your child will be placed in a class.

- 1) Credit Card online: www.sjsmrcc.com: Email Forms to: mcarnes@sjsmrcc.com
- 2) Check made out to SJSM and mail forms to: SJSM Rel. Ed. Office 30 Poillon Drive, Chappaqua, NY 10514
- 3) Hand deliver payment and forms to the parish office -- M - Th 9 AM to 3 PM OR on Sunday from 9:30 AM - 1 PM

I give my permission in the current CCD academic year, for my child/children to attend all scheduled classes/program events at The School of Religious Education at the Church of St. John and St. Mary, 30 Poillon Drive, Chappaqua. NY 10514. I understand that if a medical emergency occurs during their attendance at CCD classes or program event, the administrators and staff will take all immediate and reasonable steps necessary to access emergency medical treatment including, but not limited to calling 911 and that the emergency phone number and contact person provided by the registering guardian will be notified. I have been given the SJSM Religious Education and Safe Environment Guidelines. I agree to adhere to the necessary procedures and requirements as determined by September 2022 CDC guidelines.

Signature _____

Date _____

Office Use Only:

Tuition Due \$ _____ Tuition Paid \$ _____ Name on Check/CC Receipt _____ Check/Receipt # _____ Date Paid __/__/__