



ST. GABRIEL'S
SUMMER RELIGIOUS
EDUCATION
PROGRAM-2019 REGISTRATION
LOTTERY FORM &
REGISTRATION FORMS

St. Gabriel's Catholic Church





St. Gabriel's Catholic Church

100 North Main Street

Marlboro, NJ 07746

Phone: 732 946-4487 x 218, 223 or 227

mmykityshyn@stgabrielsparish.org

January 2019

Re: **Summer Religious Education Program**

Parents and Guardians,

Welcome to our St. Gabriel's Summer Religious Education Program for Grades 1-8. This is a one-week program offered August 5-9 OR August 12-16 from 8:30am-3:00pm. There will be 4-6 supplemental family activities throughout the year for grades 1-6. Please note: those in Grade 3 will have a minimum of 7 additional times related to the Sacraments of Reconciliation and First Holy Communion in which the student/family needs to meet. Grades 7&8 will have approximately 3 activities/family meeting times.

Registration for the 2019 Summer Religious Education Program begins in February 2019. Please find important information, requirements and dates below.

1. Registration will be held by lottery in the event we cannot accommodate all the families who have expressed interest. Please list week choice in order of preference.(SEE LAST PAGE OF PACKET)
2. Registration forms will be accepted beginning Monday, February 4, 2019. The last day to hand in completed pre-registration information will be February 11, 2019. If needed the lottery will take place on February 14, 2018. Families will be notified February 27 and 28, 2019 by email of the week we are able to provide for them.
3. Full tuition payment must be made no later than March 11, 2019 for us to hold your spot. If a family does not complete the requirements, a family on the waiting list will be notified that they have a spot. Personal situation regarding payment must be discussed with Mary Mykityshyn, DRE prior to registration paper work (March 11, 2019).

Of Importance:

1. You must be a registered member of St. Gabriel's Church
2. No late arrivals or early dismissals (including doctor, dentist appointments and sports practices).
3. Students must attend the entire week – Monday – Friday. No exceptions. An illness must be accompanied by a doctor's note.
4. All students/families must attend the follow up activities. Attendance will be monitored. For grades 1-6, you will be given a choice of approximately 7 activities. You must choose 4. Additional activities will be offered for students in grade 3.

- Students and families in grades 7&8 will attend 3 family days/retreats during the year. There will be one retreat for 7th grade and one for 8th grade. The 7th & 8th grade retreat is REQUIRED. The 8th grade retreat requires ONE ADULT to be present. Grade 7 students attend alone.

Please note the following:

In addition to teachers, volunteers are essential to this program. Volunteers are needed daily for lunch and recess. In addition, we are in need of EMTs or nurses for several hours each day. Failure to have volunteers in place will cause this program to be canceled.

Dates and Times:

Monday, August 5, 2019 – Friday, August 9, 2019 – 8:30-3:00

Monday, August 12, 2019 – Friday, August 16, 2019 – 8:30-3:00

Lunch and Snack:

Parents/Guardians are responsible for packing a healthy snack with a beverage for daily morning snack. A complete lunch including beverage must also be packed. We are unable to provide lunch or snack. **Please let us know if your child has any food allergies.** (See registration form)

Summer Religious Education Fees:

*Tuition is not refundable

NUMBER OF CHILDREN	SUMMER TUITION RATE
1	\$250.00
2	\$375.00
3	\$500.00
4	\$625.00

- Grade 3 & Grade 8 students preparing for Communion/Confirmation will be required to pay a \$75.00 sacramental fee in addition to the summer tuition rate.**



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Religious Education Parent Contract: Summer 2019

This contract must be read, signed and returned to the Religious Education office at the time of registration. Registration is considered incomplete without the signed contract. One copy per family is required.

Student(s) Name(s): Please list all students in the program.

I, _____ agree to the terms listed below:
(Parent/ Guardian's Name – **Please Print**)

1. I agree to educate my child in the Catholic Faith, partnering with St. Gabriel's Catholic Church.
2. Our family will attend Mass on Sunday and Holy Days of Obligation.
3. My child will attend all 5 days for the Summer Program and attend a minimum of 4 family days/supplemental activities throughout the year for grades 1-6 and 3 family days/retreats for grades 7&8.
4. I understand that there are no exceptions to an absence other than a doctor's note.
5. My child will adhere to the behavior code set forth by his/her teachers and will treat both teachers and classmates with respect.
6. I will check my email on a regular basis for communication from the Office of Religious Education at St. Gabriel's Church. In addition, I will check our St. Gabriel's website/ calendar for important dates.

<http://www.stgabrielsparish.org>

I agree to the above listed and will do my best to carry out the policies of the St. Gabriel's Religious Education program.

Parent / Guardian Signature and Date _____

**SAINT GABRIEL RELIGIOUS EDUCATION REGISTRATION FORM
SUMMER PROGRAM 2019
PLEASE COMPLETE ONE FORM FOR EACH CHILD**

Student's name _____
(Last name) (First name- No Nicknames)

Male or female _____ Date of Birth _____

Father's full name _____ (Biological) Father's religion _____

Mother's name _____ (Biological) Mother's religion _____
&

Maiden name _____

(Mailing name if different from the child's last name) _____

Address _____

Email (PLEASE PRINT CLEARLY) _____

BEST CONTACT PHONE NUMBER (HOME OR CELL) _____

EMERGENCY CONTACT PERSON (OTHER THAN PARENT)

What Grade will the student be in September 2019? _____

SPECIAL NEEDS: PLEASE LIST ANY ALLERGIES, OR ANY OTHER MEDICAL OR LEARNING ISSUES

YES ___ I give my permission for my child's picture to be taken and published

NO ___ I do not want my child's picture published

NEW STUDENTS ONLY: A COPY OF THE STUDENT'S BAPTISMAL CERTIFICATE MUST BE ATTACHED TO THIS FORM.

Has the student received First Reconciliation? If so, when? _____

Has the student received First Communion? If so, when? _____

Has the student received Confirmation? If so, when? _____

Signature: _____ Date: _____

OFFICE USE ONLY

TUITION FEE _____

SACRAMENT _____

TOTAL _____

CHECK# _____ DATED ___/___/2019

CASH _____ OTHER _____

St. Gabriel's Religious Education 2019
Summer Registration – 1 Form per Family
Lottery Form
Please Print Clearly

Parent/Guardian
Name(s) _____

Student Information:

Student Name(s) 1. _____ Grade Sept. 2019 _____
2. _____ Grade Sept. 2019 _____
3. _____ Grade Sept. 2019 _____

Contact Info:
Email _____ Phone _____

Week Preference: Please write 1 for first choice and 2 for second choice.

___ August 5 – August 9 8:30AM – 3:00PM

___ August 12- August 16 8:30AM – 3:00PM

___ Yes ___ No – My family was part of the August 2018 Summer Program?

___ Yes ___ No – Are you willing to volunteer the week your child attends?

___ Lunch duty(approximate time 11AM -1:30PM)

___ Parking lot duty AM or PM 8:30AM - 9:00AM and/or 2:20PM - 2:40PM

___ Miscellaneous help (Classroom, office, hallway)

Please list contacts other than parent in case of emergency:

Name	Cell	Relationship
1. _____		
2. _____		
3. _____		