

# St. Paul the Apostle † Catechetical Ministry

14085 Peyton Dr, Chino Hills CA 91709 \*\* **Phone: (909) 465-5503 x6370 Fax: (909) 465-1593**

**Email:** Religiouised@sptacc.org

## Family Registration Form 2010 - 2011

### FAMILY INFORMATION

Are you a registered member of St. Paul the Apostle Parish?  Yes  No

If yes, Envelope Number \_\_\_\_\_ If no, what parish are you registered with? \_\_\_\_\_

When sending mail, address to (circle one): Mr./Mrs. Mr. Mrs. Ms. Dr./Mrs. Mr./Dr. Other: \_\_\_\_\_

Family Name: \_\_\_\_\_  
Head of household Last name First Name

Street Address \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Unlisted?  Yes  No

Cell Phone: \_\_\_\_\_ Email Address \_\_\_\_\_

### PARENT/GUARDIAN INFORMATION

Circle Relationship to Child: **Father Stepfather Guardian**

Circle Relationship to Child: **Mother Stepmother Guardian**

Name \_\_\_\_\_

Name \_\_\_\_\_ Maiden Name: \_\_\_\_\_

Employed at \_\_\_\_\_

Employed at \_\_\_\_\_

Business Phone \_\_\_\_\_

Business Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_

Religion \_\_\_\_\_

Religion \_\_\_\_\_

Please circle

Please circle

Sacraments Received: **Baptism Eucharist Confirmation**

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Marital Status: **Married Single Separated Divorced Widow**  
Married in the Catholic Church? **Yes No**

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Married in the Catholic Church? **Yes No**

### EMERGENCY INFORMATION

**In the event of an emergency, parents will be notified first.** List an emergency contact in case parent(s) cannot be reached.

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Doctor's Name /City/Phone \_\_\_\_\_

Hospital Choice \_\_\_\_\_

Insurance Co./Policy No. \_\_\_\_\_

Please list any health conditions (i.e. allergies, medications) or behavioral conditions (i.e. attention disorders) on the Child/Teen Information section.

In case of injury or related emergency, we authorize that medical aid may be administered to our child(ren) by a person qualified to render such service, if deemed necessary by adult coordinator, staff, and/or chaperon. We understand that any insurance benefits that are effective have limited application, and we therefore have supplied all pertinent health insurance information.

Parent(s) Signature: \_\_\_\_\_ Today's Date: \_\_\_\_\_

**Check here if a copy of this was previously faxed or emailed.** Note: Registration(s) accepted via email or online still requires original signature. Please print a copy of the form for your records and mail copy with original signature to St Paul the Apostle Religious Education Office.

**TURN TO NEXT PAGE AND COMPLETE PARTICIPANT'S INFORMATION**

# REGISTRATION for CHILDREN GRADES 1 thru 8

Ongoing Faith Formation, Gr. 1-8; Sacrament Prep Classes for Reconciliation & First Communion

**Child's Name** Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

**Sex:** Male Female **Attended here before?** Yes No **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**BAPTISM INFORMATION:** Has this child been baptized? Yes No If yes, was the child baptized at St. Paul the Apostle? Yes No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

Circle which Sacraments this child has already received: Baptism Reconciliation/Penance Holy Communion/Eucharist Confirmation

Religious Education Level this year: Circle one 1 2 3 4 5 6 7 8 OR Sacrament Prep for older children: Yr 1(3-6) Yr 2 (4-6) Yr 1 (7-11) Yr2 (7-11)

School Attending: \_\_\_\_\_ Health/Behavioral Problems: (allergies, attention disorders, etc) \_\_\_\_\_

*First Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

*Second Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

**Child's Name** Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

**Sex:** Male Female **Attended here before?** Yes No **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**BAPTISM INFORMATION:** Has this child been baptized? Yes No If yes, was the child baptized at St. Paul the Apostle? Yes No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

Circle which Sacraments this child has already received: Baptism Reconciliation/Penance Holy Communion/Eucharist Confirmation

Religious Education Level this year: Circle one 1 2 3 4 5 6 7 8 OR Sacrament Prep for older children: Yr 1(3-6) Yr 2 (4-6) Yr 1 (7-11) Yr2 (7-11)

School Attending: \_\_\_\_\_ Health/Behavioral Problems: (allergies, attention disorders, etc) \_\_\_\_\_

*First Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

*Second Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

**Child's Name** Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

**Sex:** Male Female **Attended here before?** Yes No **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**BAPTISM INFORMATION:** Has this child been baptized? Yes No If yes, was the child baptized at St. Paul the Apostle? Yes No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

Circle which Sacraments this child has already received: Baptism Reconciliation/Penance Holy Communion/Eucharist Confirmation

Religious Education Level this year: Circle one 1 2 3 4 5 6 7 8 OR Sacrament Prep for older children: Yr 1(3-6) Yr 2 (4-6) Yr 1 (7-11) Yr2 (7-11)

School Attending: \_\_\_\_\_ Health/Behavioral Problems: (allergies, attention disorders, etc) \_\_\_\_\_

*First Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

*Second Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

**Child's Name** Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

**Sex:** Male Female **Attended here before?** Yes No **Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_

**BAPTISM INFORMATION:** Has this child been baptized? Yes No If yes, was the child baptized at St. Paul the Apostle? Yes No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

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*First Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

*Second Choice*  
**Catechist/Session Name:** \_\_\_\_\_ **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_ Home Site Parish

# HIGH SCHOOL & CONFIRMATION PREPARATION

Ongoing Faith Formation (9<sup>th</sup> Grade), First Communion Prep (Grades 9-12) and/or Confirmation Preparation

Name Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Email address: \_\_\_\_\_

Sex:  Male  Female Has participant attended here before?  Yes  No Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

T-shirt Size \_\_\_\_\_ Adult Small \_\_\_\_\_ Adult Medium \_\_\_\_\_ Adult Large \_\_\_\_\_ Adult Extra Large \_\_\_\_\_ Adult XXL Large

Religious Ed Level this Year:  1<sup>st</sup> Communion Classes for High School level (see class schedule booklet)

9<sup>th</sup> Grade Faith Formation

Confirmation 1 (must be in 10<sup>th</sup> grade or above)

Confirmation 1 participants are required to attend the Conf.1 Retreat. Retreat Dates:  
Retreat Dates: Mon Classes: Feb 4-6 Tue Classes: March 4-6 Wed Classes: April 1-3 Thurs Classes & Catholic Schools Students: May 13-15

Confirmation 2 (must be in 11<sup>th</sup> or 12<sup>th</sup> grade & have completed Confirmation 1 prior to entering Con 2)

Confirmation 2 participants are required to attend the Conf.2 Retreat  
Retreat Dates: Mon Classes: Nov 5-9 Tue Classes: Nov 19-21 Wed Classes: Dec 3-5 Thurs Classes & Catholic Schools Students: Jan 7-9

School Currently Attending \_\_\_\_\_ Grade Level \_\_\_\_\_

Has this teen been baptized?  Yes  No If yes, was the child baptized at St. Paul the Apostle?  Yes  No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

Check (✓) the other sacraments this student has already received  Reconciliation/Confession  First Communion  Confirmation

Health/Behavioral Problems: (allergies, attention disorders, etc) \_\_\_\_\_

First Choice Course Number \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ Preference Class Location home parish

Second Choice Course Number: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ home parish

1

Name Last \_\_\_\_\_ First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Email address: \_\_\_\_\_

Sex:  Male  Female Has participant attended here before?  Yes  No Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

T-shirt Size \_\_\_\_\_ Adult Small \_\_\_\_\_ Adult Medium \_\_\_\_\_ Adult Large \_\_\_\_\_ Adult Extra Large \_\_\_\_\_ Adult XXL Large

Religious Ed Level this Year:  1<sup>st</sup> Communion Classes for High School level (see class schedule booklet)

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School Currently Attending \_\_\_\_\_ Grade Level \_\_\_\_\_

Has this teen been baptized?  Yes  No If yes, was the child baptized at St. Paul the Apostle?  Yes  No If no, please provide the name and city of Church of baptism: \_\_\_\_\_

Check (✓) the other sacraments this student has already received  Reconciliation/Confession  First Communion  Confirmation

Health/Behavioral Problems: (allergies, attention disorders, etc) \_\_\_\_\_

First Choice Course Number \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ Preference Class Location home parish

Second Choice Course Number: \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_ home parish

# Adult Faith Formation

Fr. Pat O'Hagan and the Catechetical Ministry staff are excited to offer parents an added opportunity to grow in their faith. We are offering another series of Growing Faith sessions. We invite you to attend all the session, but are **only requiring attendance at TWO sessions per year**. Only one parent is expected to attend. We hope you will embrace this opportunity as a way of modeling to the children that faith formation is ongoing and doesn't end no matter what our age.

<b>Sep. 25</b> Maher Hall	<b>Saturday</b> 9:00-10:30am	<b>Matrimony - How is Love Blessed and Celebrated?</b> Marriage is abased on the will of a man and woman to give themselves, each to the other, mutually and definitely, in order to live a covenant of faithful and fruitful love.
<b>Sep. 29</b> Maher Hall	<b>Wednesday</b> 7:00-8:30 pm	<b>Baptism – How Do We Begin Life in the Church?</b> Baptism is a grace and a gift from God that does not presuppose any human merit.
<b>Oct. 4</b> Maher Hall	<b>Monday</b> 7:00-8:30 pm	<b>Anointing of the Sick – How Does God Heal Us?</b> The sacrament of anointing of the sick gives a special grace to Christians suffering from the difficulties of grave illness or old age.
<b>Nov. 20</b> Maher Hall	<b>Saturday</b> 9:00-10:30 am	<b>Holy Orders – How Does God Consecrate for the Service of the Church?</b> The whole church is a priestly people. Through baptism we all share in the priesthood of Christ, called the “common priesthood of the faithful”.
<b>Nov. 23</b> Maher Hall	<b>Tuesday</b> 7:00-8:30 pm	<b>God is one in Three – What is the Love of the Trinity?</b> The mystery of the Trinity is the central Christian mystery. God is three in one: Father, Son, and Holy Spirit.
<b>Jan. 27</b> Maher Hall	<b>Thursday</b> 7:00-9:00 p.m.	<b>You are the Messiah - Who Do People Say That I am?</b> The Incarnation is the mystery of the wonderful union of the divine and human natures in the one person of the Son of God.
<b>Feb. 23</b> Church	<b>Wed</b> 7:00-9:00 pm	<b>The Reign of God – What did Christ Teach?</b> The whole of Christ's life was a continual teaching: his silence, his miracles, his gestures, his prayer, his love for people, his special affection for the little and the poor, his way of the cross, and his resurrection.
<b>Mar. 30</b> Church	<b>Tuesday</b> 7:00-8:30 pm	<b>The Passion of Christ - Why did Jesus Suffer?</b> Jesus' prophetic voice threatened the church leaders of his day. Jesus freely offered himself for our salvation.
<b>May 3</b> Church	<b>Tuesday</b> 7:00-8:30 pm	<b>Resurrection – Why Do You Look for the Living Among the Dead?</b> The early followers of experienced him alive among them after his death. They especially felt his presence while sharing

## BILINGUAL ADULT FORMATION – SPANISH SESSIONS

<b>Sep. 20</b> Maher Hall	<b>Monday</b> 7:00-8:30	<b>El Bautismo ¿COMO COMENZAMOS LA VIDA EN LA IGLESIA?</b> Los que padecen la muerte a causa de la fe, los catecúmenos y todos aquellos que, bajo el impulso de la gracia, sin conocer la iglesia, buscan sinceramente a Dios y se esfuerzan por cumplir su voluntad, se salvan aunque no hayan recibido el bautismo.
<b>Oct. 4</b> Maher Hall (Rear)	<b>Tuesday</b> 7:00-8:30 pm	<b>El Martimonio ¿COMO SE BENDICE Y CELEBRA EL AMOR?</b> La alianza matrimonial, por la que un hombre y una mujer constituyen una íntima comunidad de vida y de amor, fue fundada y dotada de sus leyes propias por el Creador. Por su naturaleza está ordenada al bien de los cónyuges así como a la generación y educación de los hijos.
<b>Nov. 22</b> Maher Hall (Rear)	<b>Monday</b> 7:00-8:30 pm	<b>La Unción de los enfermos ¿COMO NOS SANA DIOS?</b> La gracia especial del sacramento de la unción de los enfermos tiene como efectos: la unión del enfermo a la pasión de Cristo, dar fortaleza, el consuelo, la paz y el ánimo para soportar los sufrimientos de la enfermedad o de la vejez.
<b>April 18</b> Church	<b>Monday</b> 7:00-8:30 pm	<b>El Orden ¿COMO CONSAGRA DIOS PARA SERVIR EN LA IGLESIA?</b> La iglesia entera es un pueblo sacerdotal. Por el bautismo, todos los fieles participan del sacerdocio de Cristo. Esta participación se llama “Sacerdocio común de los fieles.”

## **Adult Faith Formation**

**Adult Faith Formation:** Since parents are the primary catechists for their children, it is important that we take this role serious. The objective of these Adult Faith Formation sessions is to help our parents take the time to feed themselves spiritually and refresh their understanding of our Catholic faith and traditions. We do realize that many parents already are taking advantage of adult faith formation via various sources. Therefore, if you are currently active in any of the following adult formation, it can be **used as a substitute** for the Growing Faith Sessions:

___ Small Faith Community:	Please provide the name of your Small Faith Group Leader and the day and time your group meets.
___ Women's Fellowship	Must be <b>currently</b> active in Women's Fellowship
___ Men's Fellowship	Must be <b>currently</b> active in Men's Fellowship
___ Parish Ministry Formation	Must be <b>currently</b> enrolled in a PMFP course
___ Religious Education Congress	Attend two workshops at LA Congress (March 18-20)
___ Catechist Day	Attend two workshops at Catechist Day (Riverside – Aug. 21)
___ Catechist Formation	Attend two Theology Training Workshops
___ R.C.I.A. process	Currently enrolled as a participant in the RCIA process
___ Patricians Adult Catechism	Attend two sessions of Adult Catechism
___ Parish Mission	Attend two sessions of a parish mission
___ Family Retreat	Family Retreat scheduled for Sunday, October 24
___ Specialization Course	Any Specialization Course offered thru the Diocese
___ Marriage Enrichment	Attend ME Weekend as a participant - October 15-18
___ Domestic Church	Family Sessions: Nov14, Jan 9, Mar 13, Apr 10
___ Parish Ministry Retreat	TBA
___ Life in the Spirit Seminar	July 11
___ Catholic Family Conference	July 17 & 18
___ Out of Harm's Way	October 29 or 30
___ Managing Teen Life's Struggles	Feb 16, 17, 28 or March 1
___ Bible Institute	Loyola Marymount
___ Theology Courses	offered thru various universities, etc.

We will notify parents if any other events become available throughout the year.

### **ADULT FORMATION – alternative event**

**Parent Name:** \_\_\_\_\_ **Child(ren) Name(s)** \_\_\_\_\_

I attended the following event as an alternative Adult Faith Formation Session:

\_\_\_\_\_ **On (date):** \_\_\_\_\_

Parent Signature: \_\_\_\_\_

# FEE AND PAYMENT INFORMATION

<p><b>RELIGIOUS EDUCATION SESSIONS - All GRADES</b> (preschool thru high school)</p> <p>_____ \$75 per child    Number of children registering: _____</p> <p>_____ \$100.00 per child (<b>non-parishioner</b>)    Number of children registering: _____  <i>Families who are not registered members of St. Paul the Apostle Parish are charged an additional \$25 per child. The tuition fee covers operating expenses but not salaries, utilities, etc. Thus the parish supplements the Catechetical Ministry program(s).</i></p> <p><b>Catholic High School Student: <u>CONFIRMATION 1 participants ONLY</u></b></p> <p>_____ \$20 registration fee (<i>opts out of classes but attends Unity Events, Virtus Session &amp; retreats</i>)</p>	<p>Enter Total for Session Fee:</p> <p style="text-align: center;">\$ _____</p>
<p><b>ADDITIONAL FEES: Sacrament Preparation</b></p> <p>_____ <b>Reconciliation Retreat: \$5.00</b>  <i>Retreat is for children in 2<sup>nd</sup> year or Older Sacrament Yr2 who are preparing for First Confession this year.</i></p> <p>_____ <b>Eucharist Retreat: \$5.00</b>  <i>Retreat is for children in 3<sup>rd</sup> year or Older Sacrament Yr 2 who are preparing for First Communion this year.</i></p> <p>_____ <b>Confirmation Sponsor/Candidate Mini Retreat: \$40</b>  <i>Sponsor/Candidate Retreat is scheduled for April 9, 2011. Fee is due by April 4, 2011</i></p> <p>_____ <b>CONFIRMATION RETREATS: \$165</b>  <i>Confirmation 1 &amp; Confirmation 2 classes require one weekend retreat per year. The cost for each retreat is \$165. Payment for retreats should be paid one week prior to scheduled retreat date. (\$65 non-refundable fee will be charged for any teen that signs up for a retreat and fails to attend or changes retreat dates within ten calendar days of scheduled retreat). Financial arrangements can be made. Contact coordinator for more information.</i></p> <p><b>Confirmation Retreat Fee Options</b></p> <p>_____ Option 1: Pay in full at time of registration:</p> <p>_____ Option 2: \$65 deposit. Balance (\$100) due one week prior to retreat</p> <p>_____ Option 3: Eight Monthly Payments of \$21 (October thru May)</p> <p>_____ Option 4: Five bi-monthly Payments of \$33 (Oct, Dec, Feb, Apr, Jun)</p>	<p>Enter Total for Additional Fees:</p> <p style="text-align: center;">\$ _____</p>
<p><b>ALLOWANCE</b></p> <p><b>Catechist Allowance</b> <i>Catechist and Co-Catechist receives one child's tuition free per family.</i></p> <p>_____ \$75 per family</p> <p>_____ <b>Financial Hardship</b>    _____ Waive Fee.    _____ Reduce Fee  <i>Please include a letter requesting financial assistance. No child/teen will be turned away due to inability to pay fee.</i></p>	<p style="text-align: center;"><b>Subtract</b></p> <p style="text-align: center;">any Catechist allowance or Hardship Amounts:</p> <p style="text-align: center;">\$ _____</p>
<p><b>Payment Options</b> <i>Please make checks payable to St. Paul the Apostle</i></p> <p>_____ Payment Enclosed</p> <p>_____ Bill in October</p> <p>_____ Monthly Payments beginning in October 2010 (\$10 per month per child)</p>	<p>Enter Total Amount Due:</p> <p style="text-align: center;">\$ _____</p> <p style="text-align: center;">Grand total</p>

## For Office Use Only: 2010-2011 Catechetical Ministry

Registration Date: _____	Parish I.D. Number: _____	Amount Due: _____	Amount Paid: _____
Check # _____	Cash: _____	Teacher Allowance: _____	Balance Due: _____
Receipt Number: _____ Initials: _____ Funds Recorded: _____ Entered in computer on _____ by _____			