SUBSCRIBE TO EMAIL NOTIFICATIONS on our WEBSITE: www.sacredheartreligion.org CHECK FOR REMINDERS AND CHANGES ON OUR HOMEPAGE! BOOKMARK US & PUT US ON YOUR FAVORITES LIST! ALWAYS STAY IN THE LOOP!

NEW REGISTRATION	Date of Registration:	
Transfer Student Transferred	from Parish:	

SACRED HEART FAITH FORMATION PROGRAM 2023-24

Registration CANNOT be guaranteed until the fee is paid, and we have a copy of your child's Baptismal certificate. Payment Info: One child is \$150. Each additional child is \$50. Pay by CASH or a CHECK made out to Sacred Heart Religious Ed. Please talk to us about any financial issues. Name of Student: (Please Print) **Address:** (City) (State) (Number & Street) (Zip) Home Phone: Cell Phone: PARENT Email: Public School for 2023-24_____ Public School GRADE for 2023-24 DO YOU HAVE ANOTHER CHILD (OR CHILDREN) CURRENTLY ENROLLED IN OUR Faith Formation PROGRAM? YES If YES, Name: _____ Emergency Information-Must Be Completed. If Parent or Guardian Can't Be Reached Call Name of Person to Call: _____ Phone No.: _____ Relationship to Child:_____

For Office Use Only:	_FEE PAID	DAT	E:	
Check #	OR	_Cash	Balance Owed:	Fee Waived

EXPLANATION:

INFORMATION NEEDED FOR OUR RECORDS – ALSO, PLEASE NOTIFY US AT ONCE WITH ANY CHANGES TO YOUR ADDRESS, PHONE NUMBER OR EMERGENCY INFO

Father's Name:	Father's Religion:
Father: Living At Home Divorce	ed Separated Deceased
Father's Day Telephone No.:	Work
Father's Cell Phone:	
Mother's <u>FIRST</u> Name and <u>MAIDEN</u> Na	ime: (PLEASE PRINT)
Mother's Religion:	
Mother: ☐ Living At Home ☐ Divorce	ced Separated Decement Mother's
Day Telephone No.:	□ Work □ Home
Mother's Cell Phone:	
MAIL should be sent to (name & address	s)
Child's Date and Place of Birth:	
Child's Church for Baptism:	
Baptism Date:	
Baptism Certificate on File:	□ Yes □ No
Child's Church for First Eucharist:	Date:
Child's Church for First Reconciliation:	Date:
Child's Church for Confirmation:	Date:

Child's Health Information Is your child allergic to anything or have any conditions we should know about? Yes \square No If yes, please specify In order to best serve your child and provide for his/her safety, please indicate any special, emotional, physical, or educational needs OR if there are any court orders or custody issues. \square None \square Yes If yes, please specify: Child's Academic Information **Child's School Grades or Performance: Average** ☐ Above Average ☐ Below Average Is your child in any Remedial Program or have an IEP? \Box Yes \Box No If yes, please specify: Important Info for Your Child's Dismissal (should we meet for any reason this year.) Yes, I allow my child to walk home on his or her own. I will be there personally to pick up my child. Someone other than myself, will be picking up my child. Please indicate who:

Activity: Zoom Online Religious Education Meetings when offered.

Authorization and Waiver of Risk

I hereby agree and consent to my above named Child(ren) participating in online video conferencing during the duration of the meeting by way of Zoom. I acknowledge that, despite careful and proper preparation, there is still a risk of injury when participating in any activity. I release and hold harmless the Diocese of Brooklyn, Sacred Heart of Jesus Church, Glendale, NY and community, parish staff, catechist, as well as any and all other participating organizations, their officers, agents, representatives, employees, and volunteers from any and all responsibility and liability for any injury, claim, costs, or any other damages whatsoever which may result from my Child's participating in the above-named 'Activity". I further agree to assume full responsibility for the actions of my Child as well as for the payment of any and all debts incurred by my Child during his/her visit and participation in the above-named "Activity.

Online Conferencing Code of Conduct

To create the safest online community, the following guidelines will be put in place during the online gathering.

• Virtual sessions may be recorded. The recording will be used for safe environment purposes only.

Code of Conduct for Youth Participants

- Please dress as if meeting in person. Your clothing should be modest and appropriate.
- Student's screen must use correct names and appropriate backgrounds.
- Students remain on mute and only unmute when called upon.
- Students with questions use the "raise hand button."
- Parents are strongly encouraged to attend and students and families may not share the link to the virtual meeting with others.
- Please know that the sessions may be recorded for the safety of the participants and catechists.

We will automatically send the meeting link to Parent/Guardians.

Promotional Photographs

• In the interest of promoting future activities, video and still photographs may be taken during this event. This form constitutes written permission for Child's participation in the videotape and/or photographs, which may be used for future promotional efforts, including Sacred Heart of Jesus Church's website and social media.

Authorization Signature (Required for Registration)

By signing this Consent to Participate, Waiver and Release, I hereby acknowledge that I have read and fully understand all of the provisions contained above, and I knowingly consent to my Child participating in the above-named "Activity" and agree to be bound by the terms and provisions of this Consent to Participate, Waiver and Release. Furthermore, I certify that I am the Parent or Legal Guardian of the student named above and that all information provided is true and correct to the best of my knowledge.

Print Parent/Guardian First and Last Name		
Parent/Guardian Signature:	Date:	

You must fill this out to register your child in our program.

Sacred Heart Parish Confidential Census This information will not be shared with other Agencies.

Family Name					Date o	of Census_	/	_/
Address					Telepl	hone#(_)	
	<u></u>		<u></u>		E-mai	1		
Year of Registra	ntion in this Paris	h			Envelo	ope #		
Do you attend M	lass in another C	hurch? Y	es	····	No			
If yes which Chu	ırch				How o	ften?		
Please list the la	nguages spoken i	n your ho	me		<u> </u>			
Please list the he indicate their rel					en list eacl	ı member	of your hous	schold and
First Name	Relationship	Date of Birth	Sex M or F	Marital Status	Religion	If you	e indicate Yes or received these S Confirmation	Sacraments
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2.			ļ					
3								
4								
5								
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7								:
Q.			1			1		

Do you have any childr	en living in your household?	Yes	No
If yes, please list their s Religious Education Cl		If they attend a nor	1 Catholic School, do they attend
Child's Name	School's Name	Grade	Religious Education Yes or No
****		- West Address - Company of the Comp	
If yes, please list them on	the lines below:		
Parishioner's Name		Parish Gro	up or Organization
share with the Parish or to	ehold have a profession, occupate the help meet Parish needs? Yes_	No	
Name	Occupation, Talent, Hobl	by or Interest	
-	household homebound or disabl		
Would you like a Priest ar	nd a Minister of Holy Communic		
Do you have any savasan	that you would like to discuss w	YesN	
Do you have any concerns	that you would like to discuss w	ren i arion i ricot di D	an member: 1es No
Thank you for completing	this census. If you desire you m	nay attach a sheet with	

Sacred Heart Faith Formation 84-05 78th Avenue Glendale, NY 11385 (718) 386-5616



Child Lures: Empowering your children to protect themselves.

Dear Parents/Guardians,

As you know, there are people who prey on children out there in the world. Your children need some basics to help them protect themselves from such dangers. To help you, we will be presenting the *CHILD LURES* program to your child once a year in our religious education program. Giving your child this information once a year is a beginning, but it is <u>you</u> who can empower your child by discussing with them and reminding them of the dangers in their daily lives. To that end, we are providing you with the PARENT HANDBOOK so that you can also reinforce the *CHILD LURES* program with your children.

By signing below, you are acknowledging

- That you have received the *CHILD LURES Parent Handbook* and that we have asked you to read it and use it with your children. (You will receive this when you come in to register your child.)
- That you understand diocesan trained facilitators will present this material in an age appropriate way once this year to your child, and that your child will be given a *Child Lures Workbook*.

• That you are welcome to attend the presentation along with your child.	
I have received my <i>CHILD LURES PARENT HANDBOOK</i> and have been asked to read it an use it with my children, and I also understand that this will be presented to my child this year which time I am welcome to attend.	
PROGRAM: Sacred Heart Faith Formation	
YOUR CHILD'S FULL NAME (PRINT):	
YOUR FULL NAME (PRINT):	
SIGNED (parent/guardian signature):	

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STATEMENT OF PARISH AFFILIATION

Each Catholic school/academy in the Diocese of Brooklyn must make an effort to ensure that young people receive First Sacraments in their home parish where they worship each Sunday. This document is intended to identify the child's Eucharistic Community which is not necessarily the site of his or her school community.

- For the purposes of this form, parish affiliation is defined as the person's home parish. This is the parish church in which the child and his/her family worship regularly on Sundays.
- Catholics should be registered in the parish where they worship and should offer their presence and support, financial and otherwise, in said parish.
- Parents/ Guardians should fill out the form thoroughly and return it to the school/ academy **NO LATER THAN** September 15.
- The school/academy will compile a list of students and their affiliated parishes. They will then inform the parishes that have children in the school/.
- Students will receive First Sacraments in the parish they have identified as their home parish.

PARENTS/GUARDIANS PLEASE PRINT CLEARLY

STUDENT'S FULL NAME	GRADE:
TELEPHONE	EMAIL
Our family participates i	n Sunday worship (Mass) and takes part in the life of
	Church, located at
PARENT/GUARDIAN SIGNATUI	RE