

Saint Joseph the Worker Parish
4451 WILLIAMS ROAD
RICHMOND, B.C. V7E 1J7
RELIGIOUS EDUCATION OFFICE, 604-277-1066
stjw.PrepOffice@rcav.org

RELIGIOUS EDUCATION INFORMATION

Our Parish provides on-going religious education for children Grades K – 7

FOR SEPTEMBER 2024

Grades K, 1, 2, 3 & 4

Our New P.R.E.P year begins on Saturday September 14

Grades 5, 6 & 7

Our New P.R.E.P year begins on Monday, September 16

Please submit the following to register your child(ren) for PREP classes:

1. The Registration Form – Must include envelope number to receive reduced fees
 - i. **Please provide your email address.** We will use this as our primary way to communicate with you. If this is not suitable for your family, please note this on your registration form.
2. Fees: fees can be paid by e-transfer to stjw.administrator@rcav.org, interac or credit card at the Parish Office or by enclosing cash or cheque with your forms.
3. Signed “Privacy Procedures” form
If you are registering a child for Sacramental Preparation this year - First Communion or Confirmation - *please include a copy of their Baptism Certificate.*

Parents and catechists teaming together is the most important component of our religious education at St. Joseph the Worker. We thank you for your past involvement and support and encourage you to volunteer again to help out in some area of the program.

Yours in Christ,

Laura Carandang
Director of Religious Education

Saint Joseph the Worker Parish

Religious Education Office, 604-277-1066, stjw.PrepOffice@rcav.org

(Confidential)

Name: _____
(Last/ Family) (Father) (Mother)

Address: _____
(postal code)

e-mail: _____ Parish Env. # _____
(We will use this as the primary way to communicate with you.) (for charitable donation tax receipt)

Home Phone: _____ Business/Cell Phone: _____ Off. Use _____

Father's Religion: _____ Mother's Religion: _____

Please list each child who will be attending Religious Education classes in **September 2024**.

1. Note the school grade that they will be entering in the fall.
2. Indicate the year in which your child received the sacraments, leave blank for the sacraments that they have not yet received.

| Child's Name | Birth Date | Grade Sept. 2024 | Baptism (yr) | First Reconciliation (yr) | First Communion (yr) | Confirmation (yr) |
|--------------|------------|------------------|--------------|---------------------------|----------------------|-------------------|
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Fees Included: _____ I would like to split the Fees into _____ payments.

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| Parent Involvement – Our classes depend on our parent involvement. Please be generous. |
| Grade K-7 classes: Name of person volunteering _____ Hall Monitor ____ Teacher ____ Assistant ____ |

How many years of religious education or Catholic school has your child had? _____

Where? _____

Is your child receiving extra learning assistance at their public school? Yes ___ No ___

If yes, please give details:

Does your child have any allergies, or other medical concerns? Yes ___ No ___

Please give details:

If yes, does your child carry an epi –pen? Yes ___ No ___.

Date: _____

Signature: _____

Privacy Procedures Form

Family Name: _____

School Year 2024-2025

In accordance with the privacy procedures introduced in the Personal Information Protection Act, you are required to read and sign below and return this with your registration to the Religious Education Office.

I consent to having St. Joseph the Worker Parish Religious Education Program collect personal information that may include student identification information, parent's work numbers, behavioural, academic and health information, emergency contact name and number, doctor's name and number, health insurance number and any similar information needed for registration.

This information is required in order to register your child in this program. It will allow the program to respond immediately to an emergency.

Date: _____

Signature: _____

Print Name: _____

| Please read the terms of each point of consent carefully: | Please indicate | Signature (Please sign each) |
|--|-----------------|---------------------------------|
| The Religious Education Office will prepare a family contact list for each class. Do you approve to have your phone number, e-mail and address included? | YES NO | Signature: _____ |
| We have a Parish web site. Do you approve to have images of your child, without names, to be used on the Parish website? | YES NO | Signature: _____ |
| Do you approve to have photos/ video images of your child, to be used in newsletters and video presentations? (ie confirmation celebration) | YES NO | Signature: _____ |