

RELIGIOUS EDUCATION OFFICE231 SECOND STREET
CLIFTON NJ 07011**DIRECTORS OF RELIGIOUS EDUCATION**Deacon Hector Castellanos
Alvaro Leal

973-340-1300 EXT. 106

MONDAY 5:30 PM TO 8:30 PM

TUESDAY 5:30 PM TO 8:30 PM

THURSDAY 5:30 PM TO 8:30 PM OR BY APPOINTMENT

ST. PAUL R.C. CHURCH
231 SECOND STREET
CLIFTON, NJ 07011**RELIGIOUS
EDUCATION**JESUS THEN SAID: "LET THEM BE! DO
NOT STOP THE CHILDREN FROM
COMING TO ME, FOR THE KINGDOM
OF HEAVEN BELONGS TO PEOPLE
SUCH AS THESE. -MATTHEW 19:14-**RELIGIOUS EDUCATION REGISTRATION 2024-2025****OUR RELIGIOUS EDUCATION PROGRAM OFFERS THE FOLLOWING:****FIRST COMMUNION CLASSES FOR STUDENTS IN 1ST THROUGH 5TH GRADE (YOUR CHILD WILL BE PLACED IN AN AGE-APPROPRIATE CLASS)**

Students who have been baptized and have not received First Communion will be placed in Level 1 First Communion Classes. Students who have completed one year of catechesis will be placed in Level 2. If your child is transferring from another religious education program, please provide a letter of proof at the time of registration.

SUNDAY FIRST COMMUNION CLASS SCHEDULE:

First Communion classes are held every Sunday from 9:00 am to 10:30 am, followed by 11:00 am Mass. Students entering the program for the first time after third grade in elementary school who have been baptized but have not received Holy Communion will be required to attend Sunday's class as well as Sacramental classes, held every first and third Tuesday of the month from 6:30 pm to 8:00 pm at Mother Cabrini or other designated area.

FAITH FORMATION CLASSES FOR STUDENTS IN THE 3RD THROUGH 8TH GRADE

Students who have already been baptized and received Holy Communion can continue with faith formation classes held every Sunday from 9:00 am to 10:30 am at the Mother Cabrini Center, followed by 11:00 am Mass.

Middle School students (6th, 7th, and 8th grade) can participate in faith formation classes held the 1st and 3rd Tuesday of every month from 6:30 pm to 8:00 pm at the Mother Cabrini Center from September to Easter.

RCIA FOR CHILDREN/TEENAGERS, AGES 7 TO 17 YEARS OF AGE SEEKING BAPTISM AND OR FIRST COMMUNION

Children ages seven (7) through ten (10) years of age can only celebrate the Sacrament of Baptism in the first year of religious education. He/she will be required to attend an additional year to celebrate his/her First Communion or can elect to attend Sacramental Classes as an alternative to his/her second year.

Baptism and First Communion for children ages eleven (11) through seventeen (17).

RCIA classes are held following the 9:00 am Mass every Sunday from 10:00 am to 11:00 am at the Parish Hall Conference Room, from September to Easter.

RCIA FOR ADULTS

Adults seeking the sacraments of initiation (baptism, holy communion, and or confirmation) must attend RCIA for adults and be guided by the RCIA class schedule. The class meets from 10:00 am to 11:30 am every Sunday following the 9:00 am Mass at the Parish Hall or other designated area.

CONFIRMATION PROGRAM FOR HIGH SCHOOL STUDENTS (2 YEARS)

High school students who have been baptized and have received his/her First Communion are encouraged to attend the Confirmation Program to prepare and receive the Sacrament of Confirmation, students nearing their eighteenth (18th) birthday are encouraged to apply to the RCIA Adult Program. Classes are held every Sunday beginning with the 11:00 am Mass, followed by class instruction from 12:00 noon to 1:30 pm at the Mother Cabrini Center.

YOUTH MINISTRY

All high school students are invited to attend St. Paul's Youth Ministry, please get in touch with our Parish Office for more information.

REGISTRATION IS OPEN FROM JULY 1, 2024, THROUGH AUGUST 31, 2024**THE FEE PER STUDENT ENROLLED IS \$120.00. ALL REGISTRATIONS REQUIRED A COPY OF THE STUDENT'S BIRTH CERTIFICATE AND IF APPLICABLE, BAPTISMAL AND FIRST COMMUNION CERTIFICATE(S).**

LATE REGISTRATION: SEPTEMBER 1, 2024 - SEPTEMBER 15, 2024 (\$24.00 LATE FEE WILL BE APPLIED)

REGISTRATIONS AFTER SEPTEMBER 15, 2024, MAY BE CONSIDERED SUBJECT TO CLASS AVAILABILITY.

MAKE CHECKS PAYABLE TO: ST. PAUL R.C. CHURCH; CREDIT CARDS ACCEPTED AT THE PARISH OFFICE

PLEASE RETURN REGISTRATION FORM, TOGETHER WITH PAYMENT AND APPLICABLE CERTIFICATES TO THE PARISH OFFICE.

REGISTRATION FORM 2024-2025

STUDENT INFORMATION

FIRST NAME: _____ LAST NAME: _____ DATE OF BIRTH _____
GRADE IN SCHOOL SEPTEMBER 2024: _____

PLACE OF BIRTH: _____
(ADDRESS) _____

NUMBER AND STREET NAME: _____ APARTMENT OR FLOOR NUMBER, IF ANY: _____

CITY: _____ STATE: _____

ZIP CODE: _____ PHONE NUMBER: _____

PARENT INFORMATION

FATHER

FIRST NAME: _____ LAST NAME: _____ PHONE #: _____

ADDRESS: NUMBER AND STREET NAME IF DIFFERENT FROM STUDENT INFORMATION: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL ADDRESS: _____

MOTHER

FIRST NAME: _____ LAST NAME: _____ PHONE: _____

ADDRESS: NUMBER AND STREET NAME IF DIFFERENT FROM STUDENT INFORMATION: _____

CITY: _____ STATE: _____ ZIP CODE: _____

EMAIL ADDRESS: _____

SACRAMENTAL INFORMATION

IS THE STUDENT BAPTIZED? _____ YES, (IF YES, PLEASE ANSWER BELOW). _____ NO

DATE OF BAPTISM _____ CHURCH NAME _____

ADDRESS OF CHURCH (#, STREET, CITY, STATE, ZIP CODE) _____

DID THE STUDENT RECEIVE THE SACRAMENTS OF RECONCILIATION AND FIRST COMMUNION, IF YES, PLEASE PROVIDE APPLICABLE CERTIFICATES _____ YES, (PLEASE PROVIDE A COPY OF APPLICABLE CERTIFICATES). _____ No

PLEASE SPECIFY WHICH SACRAMENT THE STUDENT IS ENROLLING FOR

BAPTISM _____ RECONCILIATION & FIRST COMMUNION _____ CONFIRMATION _____

(OFFICE USE ONLY) THE STUDENT IS ASSIGNED TO (PLEASE CHECK)

FIRST COMMUNION & RECONCILIATION _____ FAITH FORMATION _____ RCIA CHILD _____ RCIA ADULT _____ CONFIRMATION (HIGH SCHOOL) _____

PARENT AND OR STUDENT AGREEMENT

I RECOGNIZE THAT PARENTS ARE THE PRIMARY EDUCATORS IN THE FAITH. I ALSO UNDERSTAND THAT THE CATECHESIS GIVEN BY PARENTS WITH THE FAMILY PRECEDES, ACCOMPANIES, AND ENRICHES ALL OTHER FORMS OF CATECHESIS, AS SUCH, I AGREE AND UNDERSTAND THAT I WILL TAKE MY CHILD TO RELIGIOUS CLASSES WEEKLY, TAKE TIME TO TALK TO HIM/HER ABOUT SUNDAY’S CLASSES, PRAY WITH HIM/HER AND ACCOMPANY HIM/HER TO MASS WEEKLY.

FOR STUDENTS ENROLLING IN THE RCIA ADULT PROGRAM, I UNDERSTAND AND AGREE TO ATTEND AND PARTICIPATE IN ALL ASPECTS OF THE PROGRAM’S CATECHESIS.

PARENT / STUDENT SIGNATURE: _____ DATE: _____
(PARENT, PLEASE SIGN IF YOUR CHILD IS UNDER 18. IF A STUDENT IS ABOVE 18, PLEASE SIGN ACKNOWLEDGING THE ABOVE AGREEMENT).

MEDICAL INFORMATION

IS THE STUDENT UNDER ANY TYPE OF MEDICATION, IF SO, WHAT IS IT? _____ YES _____ NO

IS THE STUDENT ALLERGIC TO ANY TYPE OF MEDICATION OR FOOD, IF SO, PLEASE DESCRIBE? _____ YES _____ NO

IS THE STUDENT PRESENTLY TAKING MEDICATION OR IS THE STUDENT UNDER MEDICATION OVER A PERIOD, IF SO, PLEASE DESCRIBE? _____ YES _____ NO

IN THE EVENT OF AN EMERGENCY, WHOM SHOULD WE CONTACT? NAME, ADDRESS, AND PHONE NUMBER NAME: _____

(ADDRESS) STREET NAME AND NUMBER PHONE #: _____
CITY: _____ STATE _____
ZIP CODE: _____

IS THERE ANYTHING THAT YOU WANT TO SHARE ABOUT THE STUDENT? IF SO, PLEASE ADVISE _____

**PARENT PERMISSION IF THE STUDENT IS UNDER THE AGE OF 18
OR IF THE STUDENT IS OVER THE AGE OF 18**

MEDICAL RELEASE

(THE APPLICANT CAN SIGN IF HE/SHE IS OVER THE AGE OF 18, IF NOT, THE PARENT OF THE CHILD IS REQUIRED TO SIGN THIS MEDICAL RELEASE.)

I, _____, CERTIFY THAT MY CHILD, OR AS A STUDENT OVER THE AGE OF 18, CONSENTS TO ATTEND ALL ACTIVITIES COORDINATED BY ST. PAUL’S RELIGIOUS EDUCATION PROGRAM OFFICE FOR THE YEAR 2024-2025. I HEREBY RELEASE ST. PAUL R. C. CHURCH AND ITS STAFF, VOLUNTEERS, THE DIOCESE OF PATERSON, ITS VARIOUS ORGANIZATIONS, AND THE ACTIVITY SPONSORS FROM ANY LIABILITY FOR INJURIES SUFFERED BY MY CHILD ND OR STUDENT WHILE HE/SHE IS UNDER THE SUPERVISION OF THE SPONSORS AND OR VOLUNTEERS OF THESE ACTIVITIES.

ROMAN CATHOLIC DIOCESE OF PATERSON

ST. PAUL R.C. CHURCH
PERMISSION TO PUBLISH

STUDENTS WORK & RELEASE TO USE WORK OR IMAGE FOR PROMOTIONAL PURPOSES &
PARTICIPATION IN MEDIA EVENTS

DEAR PARENTS OR STUDENT IF OVER THE AGE OF 18;

THROUGHOUT THE YEAR, THE STUDENT MAY PARTICIPATE IN SPECIAL RELIGIOUS EDUCATION EVENTS AT ST. PAUL R.C. CHURCH. THE OPPORTUNITY TO PUBLISH THE PHOTOS OF THE STUDENT EITHER ALONE OR IN A GROUP IS AT THE PARENT'S DISCRETION. THE PUBLICATION MEDIA INCLUDES THE PARISH NEWSLETTER, PARISH WEBSITE, THE BEACON, OUR DIOCESAN NEWSPAPER AS WELL AS SECULAR PUBLICATIONS, SUCH AS *THE DAILY RECORD*. MANY NEWSPAPERS ALSO HAVE "ONLINE" VERSIONS OF STORIES, AND SEVERAL ARE MOUNTING VIDEO STREAMING OR PHOTO DEX PRESENTATIONS ON THEIR SITES. THIS PERMISSION FORM IS DESIGNED TO OBTAIN YOUR PERMISSION TO INCLUDE THE STUDENT IN THESE ACTIVITIES. THERE IS NO COMPENSATION OR PENALTY ATTACHED TO YOUR SELECTION OF APPROVAL. YOUR CHOICE WILL BE EFFECTIVE FOR THE PERIOD THAT YOUR CHILD IS ENROLLED IN THE ST. PAUL R.C. CHURCH'S RELIGIOUS EDUCATION PROGRAM UNLESS SPECIFICALLY CHANGED AT YOUR WRITTEN REQUEST WHICH YOU MAY DO AT ANY TIME.

_____ YES, I GRANT PERMISSION TO PUBLISH THE STUDENT'S PHOTOGRAPH, VIDEO CLIP, AND/OR WORK.

_____ NO, I DO NOT GRANT PERMISSION TO PUBLISH ANYTHING CONCERNING THE STUDENT'S PHOTOGRAPH, VIDEO CLIP, AND/OR WORK.

THIS FORM MUST BE COMPLETED AS PART OF THE APPLICATION PROCESS. FAILURE TO RESPOND IS CONSENT AND GRANTS PERMISSION TO PARTICIPATE.

PARENT / STUDENT IF AGE 18 OR OLDER

SIGNATURE: _____ DATE: _____

FOR OFFICE USE ONLY: THE APPLICATION IS INCOMPLETE UNLESS THE ACCOMPANYING CERTIFICATES ARE ATTACHED HERETO WITH FORM OF PAYMENT.

PAYMENT
TYPE:
(CASH/CHECK/
CREDIT CARD)

DATE: _____ If CHECK, CHECK # _____

BIRTH CERTIFICATE _____ BAPTISMAL CERTIFICATE _____ FIRST COMMUNION
CERTIFICATE, IF APPLICABLE _____

NOTES: _____