

**RELIGIOUS EDUCATION OFFICE**

231 SECOND STREET  
CLIFTON NJ 07011

**DIRECTORS OF RELIGIOUS EDUCATION**

**Deacon Hector Castellanos**  
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BY APPOINTMENT ONLY



**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 2023-2024**

**OUR RELIGIOUS EDUCATION PROGRAM OFFERS THE FOLLOWING:**

**FIRST COMMUNION CLASSES FOR STUDENTS IN 1<sup>ST</sup> THROUGH 5<sup>TH</sup> GRADE (YOUR CHILD WILL BE PLACED IN AN AGE-APPROPRIATE CLASS)**

Students that have been baptized and have not received First Communion will be placed in Level 1 First Communion Classes. Students that that have completed Level 1 (1 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 9:00am - 10:30am, followed by 11:00am Mass at St. Paul R.C. Church. Students entering the program for the first time in the 3<sup>rd</sup> through 5<sup>th</sup> grade that have been baptized and have not received First Communion will be required to attend Sunday faith formation classes, as well as sacramental classes. Sacramental classes are held the 1<sup>st</sup> and 3<sup>rd</sup> Tuesday of every month from 6:30pm -8:00pm at the Mother Cabrini Center.

**FAITH FORMATION CLASSES FOR STUDENTS IN THE 3<sup>RD</sup> THROUGH 8<sup>TH</sup> GRADE**

Students that have already been baptized and received First Communion; Classes are held every Sunday from 9:00am - 10:30am at the Mother Cabrini Center, followed by 11:00am Mass at St. Paul R.C. Church.

Middle School (6<sup>th</sup>, 7<sup>th</sup> and 8<sup>th</sup> grade) classes are held on the 1<sup>st</sup> and 3<sup>rd</sup> Tuesday of every month from 6:30pm-8:00pm at the Mother Cabrini Center from September to Easter.

**RCIA ADAPTED FOR CHILDREN/TEENAGERS 7 TO 17 YEARS OLD SEEKING BAPTISM AND FIRST COMMUNION**

Baptism for 7 through 10-year-olds.

Baptism and First Communion for 11 through 17-year-olds.

RCIA classes are held every Sunday from 12:00 pm to 1:15 pm at the Mother Cabrini Center from September to Easter.

*RCIA FOR ADULTS SEEKING THE SACRAMENTS OF INITIATION MUST ATTEND RCIA FOR ADULTS AND BE GUIDED BY THE RCIA CLASS SCHEDULE FOR ADULTS.*

**CONFIRMATION PROGRAM FOR HIGH SCHOOL STUDENTS**

For freshmen, sophomores and juniors that have been baptized and have received their First Communion; 18 years of age and older must attend the Adult RCIA classes.

**Confirmation Class Schedule**

Classes are held every Sunday beginning with the 11:00am Mass in St. Paul R.C. Church, followed by class from 12:00pm – 1:30 pm at the Mother Cabrini Center.

**YOUTH MINISTRY** All high school students are invited to attend the St. Paul Youth Ministry. Please contact our Parish Office.

**Registration is open from July 1, 2023, through August 31, 2023**

Fee per Student enrolled is \$100.00.

Late Registration: September 1, 2023 - September 15, 2023 (\$10.00 late fee will be applied)

REGISTRATIONS AFTER SEPTEMBER 15, 2023, MAY NOT BE CONSIDERED

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.

ALL REGISTRATIONS WILL REQUIRED A COPY OF THE STUDENT'S BIRTH CERTIFICATE, CURRENT BAPTISMAL CERTIFICATE AND FIRST COMMUNION CERTIFICATE IF ENROLLING IN CONFIRMATION AND OR RCIA ADULT CLASSES

**REGISTRATION FORM 2023-2024**

**STUDENT INFORMATION**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_  
GRADE IN SCHOOL IN \_\_\_\_\_  
PLACE OF BIRTH: \_\_\_\_\_ SEPTEMBER 2023 \_\_\_\_\_

**PARENT INFORMATION**

**FATHER**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

**MOTHER**

FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

**SACRAMENTAL INFORMATION**

IS THE STUDENT BAPTIZED? \_\_\_\_\_ Yes \_\_\_\_\_ 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 \_\_\_\_\_ No

**PLEASE SPECIFY WHICH SACRAMENT THE STUDENT NEED TO RECEIVE.**

BAPTISM \_\_\_\_\_ RECONCILIATION \_\_\_\_\_ FIRST COMMUNION \_\_\_\_\_ CONFIRMATION \_\_\_\_\_

**WHAT CLASS IS THE STUDENT REGISTERING FOR?**

FIRST FAITH RCIA RCIA  
COMMUNION \_\_\_\_\_ FORMATION \_\_\_\_\_ CHILD \_\_\_\_\_ ADULT \_\_\_\_\_ CONFIRMATION \_\_\_\_\_

**PARENT/ 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 CLASSES WEEKLY, TAKE TIME TO TALK ABOUT THE CLASSES, PRAY WITH MY CHILD AND ATTEND MASS ON SUNDAY. IF A STUDENT ABOVE THE AGE OF 18, I AGREE TO ATTEND AND TO PARTICIPATE IN ALL ASPECTS OF THE PROGRAM’S CATECHESIS.

PARENT / STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**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: \_\_\_\_\_

PHONE #: \_\_\_\_\_

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

\_\_\_\_\_

**PARENT PERMISSION/ STUDENT IF OVER THE AGE OF 18, MEDICAL RELEASE**

I, \_\_\_\_\_, CERTIFY THAT MY CHILD, OR SELF IF PARENT FOR CHILD OR IF OVER THE AGE OF 18, STUDENT NAME

OVER THE AGE OF 18, HAS MY CONSENT TO ATTEND ALL ACTIVITIES COORDINATED BY ST. PAUL RELIGIOUS EDUCATION PROGRAM OFFICE FOR THE YEAR 2023-2024. I HEREBY RELEASE ST. PAUL R. C. CHURCH AND ITS STAFF AND VOLUNTEERS, THE DIOCESE OF PATERSON, ITS VARIOUS ORGANIZATIONS, AND THE ACTIVITY SPONSORS FROM ANY LIABILITY FOR INJURIES SUFFERED BY MY CHILD/ STUDENT, WHILE HE/SHE IS UNDER THE SUPERVISION OF THE SPONSORS/ VOLUNTEERS OF THESE ACTIVITIES.

**FOR OFFICE USE ONLY: APPLICATION IS INCOMPLETE UNLESS THE ACCOMPANYING CERTIFICATES ARE ATTACHED HERETO**

DATE: \_\_\_\_\_ PAYMENT: \_\_\_\_\_ IF CHECK, CHECK # \_\_\_\_\_

BIRTH CERTIFICATE \_\_\_\_\_ BAPTISMAL CERTIFICATE \_\_\_\_\_ FIRST COMMUNION CERTIFICATE, IF APPLICABLE \_\_\_\_\_

NOTES:

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 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.

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\_\_\_\_\_ 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 A CONSENT AND GRANTS PERMISSION TO PARTICIPATE.**

PARENT / STUDENT IF AGE 18 OR OLDER

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_