

Office of Faith Formation 10 Father Salemi Drive Ansonia, CT 06401

reled@holyrosaryansonia.org

Dear Parents:

Enclosed are registration materials for Religious Education Classes for 2019-2020. All classes for the lower grades (2-6) will be held Sunday mornings from 9:50 AM - 10:55 AM. Classes for older students (Grades 7-12) will be held at both Holy Rosary and Assumption Churches. More information will be available in August. Note that **fees depend on when you register. They must be paid at the time of registration.**

Classes: Begin Sept. 15th

We also have a parish Facebook page for our Faith Formation Office! If you wish to join you can go to Facebook and look for **HolyRosary FaithFormation Ansonia**. That is ours. We presently have a picture of Our Lady recently crowned as our profile photo. You must then ask permission to join. It may take some time for us to respond. After this you will be able to go to this Facebook page whenever you want and may actually receive notices of when we add new photos or information.

We also have an app, <u>myParish</u>, which will keep you up to date with what is going on at Holy Rosary throughout the week. Activities involving Religious Education will be listed there and you can receive and respond to messages from the various groups. There is great information on this app such as past homilies, news, prayers and more. Just text **App** to **88202** to join.

If you would like us to post photos of your child now and/or throughout the 2019-2020 school year, please sign permission at the bottom of the registration form.

Sincerely,

The Holy Rosary Jaith Formation Team

HOLY ROSARY FAITH FORMATION PROGRAM EXPENSES 2019-2020

Date:							
Family Name:				(Mother's First)			
Address:	Standah		T			(7:n)	
	(Street)		(Town)			(Zip)	
Home Phone:		Previous Year's Bal			lance		
Please Note: All	fees are waived for W	<u>EEKLY</u>	<u>/</u> Instru	ctors an	d Assista	ants.	
Number of Children	Name of Child(ren)	Fee if Paid By July 1	Fee if Paid By Aug. 1	Fee if Paid By Sept. 1	Fee if Paid By Oct. 1	Amount	
One Child		\$40	\$45	\$50	\$55		
Two Children		\$75	\$80	\$85	\$90		
Three or More Children		\$100	\$105	\$110	\$115		
Please add	\$10 if you are not a Parish		er of H	oly Ros	sary		
		Total:					
etter explaining	can't pay tuition due t why you would have o pproved will be excuse	difficulty			-		
Date Paid:							
Method	of Payment: Cash			_ Amou	nt Paid _		
	Check #			Amou	ınt Paid		
					_	Thank Yo	

HOLY ROSARY FAITH FORMATION REGISTRATION 2019-2020

Family Name:	Father's Last:	First:		
Mot	her's Maiden:	First:		
Parent Informa	tion: Marital Status: Single Married	Divorced Remarried	l	
Father's Address:	Street	Town		
	Home Phone Cel	ll Phone		
Mother's Address	: Please check if same as above address			
	Street	Town		
	Home Phone Ce			
Holy Rosary Parisl	nioner: Y N Other:			
E-Mail Address: _				
(Please make sur	e you give us an email that is checked often. We c	do use email notifications frequent	ly.)	
Emergency Conta	ct: Name	Phone #		
	Relationship to Student			
Morning (All Classes Will Be of Classes — Please attend Mass — Classe			
Grade 2 - Name	:			
Grade 3 - Name				
	:			
Grades 4, 5 - Na		Please in		
Grades 4, 5 - Na	ıme:	Please		

OVER

Grades 7 & 8 - Name:			Please indicate		
			_ grade (7 or 8)		
Sunday Evening Class a month from 6-8 PM. Both yo			e - Meet two-three times		
a month from 0-3 i wi. Both y	ears are required in order to	receive communicion.			
Confirmation 1 - Name:					
Confirmation 2 – Namo:					
Confirmation 2 – Name:					
Student Information (Please fi	_				
Note: If student was not baptized Baptism Certificate and First Holy			please provide a copy of their		
1. Name:	Nickname:	Date of Birth:			
School Attending:	Allergies/Health Prob	olems/Classroom Concerns:			
2. Name:	Nickname:	Date of Birth:			
School Attending:	Allergies/Health Pro	blems/Classroom Concerns:			
3. Name:					
School Attending:	Allergies/Health Prob	olems/Classroom Concerns:_			
4. Name:	Nickname:	Date of Birth:			
School Attending:	Allergies/Health Prob	olems/Classroom Concerns:_			
Important! Please sign!					
I give permission for my child(ren) to be photographed. I	understand that these p	hotographs may be used		
in the promotion of Holy Rosa	ry Church.				
Yes No Parent Signa	ature:				