**The Basilica of St. Stanislaus Basilica**

**Parish Office: 40 Cyman Drive Chicopee, MA 01013 413-594-6669**

**2020-2021 REGISTRATION**

**Religious Education Family Information Form**

**PLEASE PRINT Kindergarten through Grade 8 PLEASE PRINT**

**1st Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade in Sept. 2020 \_\_\_\_\_**

**2nd Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade in Sept. 2020 \_\_\_\_\_**

**3rd Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade in Sept. 2020 \_\_\_\_\_**

**4th Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade in Sept. 2020 \_\_\_\_\_**

**Father’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion \_\_\_\_\_\_\_\_\_\_\_\_**

**Mother’s Name (Include Maiden) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Religion \_\_\_\_\_\_\_\_\_\_\_\_**

**Parent’s Marital Status: (Check One) Married \_\_\_ Separated \_\_\_ Divorced \_\_\_ Widowed \_\_\_**

**Child(ren) lives with: (Check One) Both Parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_**

 **Other \_\_\_ (Name/Relationship) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student’s Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_**

 **Street City State Zip**

**Parent E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**We are parishioners of St. Stanislaus Basilica\_\_\_\_\_\_\_\_\_\_**

**We are parishioners of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Church located in (City, State) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Additional Information: Complete this section if there is a Parent who is not living at the student’s address listed above, but should be notified of progress and/or special events.**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_\_**

**Mailing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**E-Mail Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**EMERGENCY CONTACT INFORMATION:**

**Mother’s Cell Phone #** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Father’s Cell Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Information of another person if neither mother nor father can be contacted:**

**Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to the Child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Another Phone # \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **For Office Use Only:**Rec’d form: \_\_\_\_\_\_\_\_\_\_Rec’s fee: $\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_Check # \_\_\_\_\_\_\_\_\_\_\_ Initial **\_\_\_\_\_\_\_\_\_** | **Fee:****$45 per child $80 for two children $100 for three or more children** **Non-parishioner: $95 per child****If you register before July 24, 2020, the Fee will be $35 per child,****$60 for two children $70 for three or more children** ***Checks made payable to St. Stanislaus Basilica*** ***Return registrations to the Parish Office 40 Cyman Drive Chicopee 01013*** |

**1st Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_**

**Baptized at St. Stanislaus Basilica \_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_**

**Baptized at** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Church**

 **located in (City/State/Country)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_**

**Child will attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Public/ Charter School in Sept. 2020**

**Please list any learning needs, health issues (including allergies, medications, etc.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**2nd Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_**

**Baptized at St. Stanislaus Basilica \_\_\_\_ Date \_\_\_\_\_\_\_\_**

**Baptized at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Church**

 **located in (City/State/Country)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_**

**Child will attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Public/Charter School in Sept. 2020**

**Please list any learning needs, health issues (including allergies, medications, etc.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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**3rd Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Baptized at St. Stanislaus Basilica \_\_\_\_ Date \_\_\_\_\_\_\_\_\_**

**Baptized at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Church**

 **located in (City/State/Country) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_**

**Child will attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Public/Charter School in Sept. 2020**

**Please list any learning needs, health issues (including allergies, medications, etc.**

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**4th Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Baptized at St. Stanislaus Basilica \_\_\_\_ Date \_\_\_\_\_\_\_\_\_**

**Baptized at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Church**

 **located in (City/State/Country)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_**

**Child will attend \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Public/Charter School in Sept. 2020**

**Please list any learning needs, health issues (including allergies, medications, etc.**

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| **PARENT AND STUDENT LEARNING AND BEHAVIOR AGREEMENT****I have reviewed the classroom expectations with my child who understands what is expected of him/her and agrees to follow those expectations. I accept my parental spiritual responsibilities and will support the efforts of my child’s catechist by ensuring his/her regular class attendance, taking an active interest in my child’s progress and making weekly Saturday evening or Sunday Mass a regular part of our family’s experience.****Mother’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Father’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **PROTECTION OF YOUTH****As part of our ongoing commitment to PROTECT CHILDREN from hurtful behaviors by others,** **St. Stanislaus Faith Formation Ministry teaches students about personal safety. This is part of the Diocese of Springfield’s “Safe Environment” programming which includes background checks and training for adults who have contact with children, resources for parents, and skills trainings for teens in our parishes, schools and youth ministries.** **Presented in the context of our Catholic faith, the goal of the Circle of Grace Program is to educate** **and empower children and young people to actively participate in a safe environment for themselves and others.** **The Objectives of the Circle of Grace Program are:** **Children/Young People will**  **\*understand they are created by God and live in the love of the Father, Son and Holy Spirit** **\*be able to describe the Circle of Grace which God gives each of us.** **\*be able to identify, discern and maintain appropriate physical, emotional, spiritual and sexual** **boundaries.** **\*be able to identify all types of boundary violations.** **\*demonstrate how to take action if any boundary is threatened or violated.****Please check one:**  **I give permission for my child(ren) to participate in the Circle of Grace Program. \_\_\_\_\_** **I do not give permission for my child(ren) to participate in the Circle of Grace Program. \_\_\_\_** **Mother’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_** **Father’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_** **Guardian’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_** |

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| **SOCIAL MEDIA/PHOTO PERMISSION****During the 2020-21 year of classes, the St. Stanislaus Basilica Religious Education students may participate in news stories about religious education classes or special activities. This may include videotape, audio recording, web posting or still photograph productions that involve the use of students’ names, likenesses or voices. Such productions may be used for educational or exhibition purposes by the St. Stanislaus Basilica Religious education program or the Diocese of Springfield and they may be copied, copyrighted, edited and distributed.****News media, including representatives of television, radio, newspapers and magazines, also may be permitted on school/parish property and may take still photos, sound records and/or videos or moving pictures that may include your child. These items may appear or be used in news or feature stories by print, television, website posting or radio media. As part of the Diocese of Springfield’s Safe Environment policies, we do not publish children’s addresses or information about children without the permission of the child’s legal guardian.****Please COMPLETE THE FORM BELOW and CHECK ALL THAT APPLY.****I, the undersigned, DO CONSENT AND GRANT FULL PERMISSION for St. Stanislaus Basilica Religious Education Program and/or the Diocese of Springfield to use the:** **\_\_\_\_First Name(s) only** **\_\_\_\_First and last name(s)** **\_\_\_\_Photograph** **\_\_\_\_Voice** **\_\_\_\_Other likenesses (video, film)****of my child(ren) for new releases, media and promotional activities. This request is valid for the current year of religious education classes 2019-2020****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Name (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_****OR****I, the undersigned DO NOT GRANT CONSENT AND FULL PERMISSION FOR THE ABOVE.****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_****Name (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_** |