

Saint Paul of the Cross Parish
Saint Anne and Saint Winifred Faith Formation

550 Sleep Hollow Rd, Mount Lebanon, PA 15228

Director of Elementary Faith Formation: Colette Speca (cspeca@stwinifred.org)

Director of Youth and Young Adult: Mathew Scruggs (mscruggs@stanneparish.com)

Attached is the registration form for 2019-2020 Faith Formation at Saint Paul of the Cross Parish comprised of Saint Anne Church and Saint Winifred Church.

- **Classes begin on Catechetical Sunday, September 15, 2019 in Benedict Hall at Saint Winifred Church.** More details about our first day of classes will be sent out in August.
- Faith Formation sessions will be offered for all grades on **Sundays, 10 am – 12:30 pm** and **Mondays, 4:15 pm – 6:15 pm**; both sessions include Mass. A **Home-Based Faith Formation Program** is available for all grades, as well. Home-Based families are provided the materials to complete the faith formation curriculum together at home.
- All parents are expected to attend a monthly **Adult Catechesis Session** in Benedict Hall during their child's normal class session. Home-Based parents may choose which session they prefer to attend.
- **Please return your registration form and payment to the Faith Formation Office (address above) by July 31, 2019.** We suggest you register early, as classes will be capped to an appropriate size. We are not able to take requests for specific classrooms and/or catechists. Checks can be made payable to Saint Paul of the Cross Parish. Please write "Faith Formation Registration" in the memo.
- Please **print neatly and complete every applicable blank.** Email is our primary form of communication, so please include at least one email address. Information must be updated annually and will be treated in a confidential manner.
- **It is our goal to serve every child to the best of our abilities. Please be very specific when describing any special needs,** including allergies, cognitive, physical, social, emotional, learning, or otherwise. Feel free to attach additional papers to provide more information. This information will be held in the strictest confidence and used only to help us serve you and your children better.
- **No child will ever be turned away from our program for financial reasons.** Scholarships are available. Please e-mail cspeca@stwinifred.org to discuss available scholarships.
- **We need your help! Parent volunteers are an important component to the success of our program.** We are in need of volunteers to share their time and faith. A catechist has a very important ministry in the church as a teacher of our children. Please prayerfully consider volunteering to serve our students as a Catechist, Assistant Catechist, Substitute, or Office Aide. Contact Amanda Scruggs at ascruggs@stanneparish.com for more information or to volunteer. *Registration fees are waived for students whose parents volunteer to serve as a Catechist or Assistant Catechist!*

**Saint Paul of the Cross Parish
Faith Formation Program
2019-2020 Registration Form**

Office Use Only Date Received: _____ Amount: \$ _____ Cash: _____ Check #: _____
--

Family Information

- YES, we are registered members of Saint Paul of the Cross Parish (Saint Anne Church & Saint Winifred Church)
- NO, we are registered members of _____ and we have obtained the REQUIRED permission from our parish to participate in Saint Paul of the Cross Faith Formation Program.

Mother/Guardian Name: (First/Last/Maiden): _____

Cell Phone: _____ Email: _____

Father/Guardian Name: (First/Last): _____

Cell Phone: _____ Email: _____

Street Address: _____ **City/State/Zip Code:** _____

Primary Email: _____ **Primary Phone:** _____

***Please provide at least one email address, as this is our primary communication tool.**

Emergency Contact: _____ **Phone:** _____ **Relationship:** _____

If custody is shared, list the name of parent and secondary phone, email, and mailing address:

Student Registration

Student 1 Information

Name: _____ Date of Birth: _____ Gender: _____

School District: _____ Grade in Fall 2019: _____

Medical/Behavioral Needs: _____

Check One Session: Sunday 10 am – 12:30 pm (K-8) Monday 4:15 pm – 6:15 pm (K-8)
 Home-Based Program (K-8)

Check if this student will be preparing for First Communion (2nd) or Confirmation (8th) during the 2019-2020 school year.

Check if this student is new to our program. Include a copy of her/his baptismal certificate if not baptized at Saint Anne or Saint Winifred.

Student 2 Information

Name: _____ Date of Birth: _____ Gender: _____

School District: _____ Grade in Fall 2019: _____

Medical/Behavioral Needs: _____

Check One Session: Sunday 10 am – 12:30 pm (K-8) Monday 4:15 pm – 6:15 pm (K-8)
 Home-Based Program (K-8)

Check if this student will be preparing for First Communion (2nd) or Confirmation (8th) during the 2019-2020 school year.

Check if this student is new to our program. Include a copy of her/his baptismal certificate if not baptized at Saint Anne or Saint Winifred.

Student 3 Information

Name: _____ Date of Birth: _____ Gender: _____

School District: _____ Grade in Fall 2019: _____

Medical/Behavioral Needs: _____

Check One Session: Sunday 10 am – 12:30 pm (K-8) Monday 4:15 pm – 6:15 pm (K-8)
 Home-Based Program (K-8)

Check if this student will be preparing for First Communion (2nd) or Confirmation (8th) during the 2019-2020 school year.

Check if this student is new to our program. Include a copy of her/his baptismal certificate if not baptized at Saint Anne or Saint Winifred.

Student 4 Information

Name: _____ Date of Birth: _____ Gender: _____

School District: _____ Grade in Fall 2019: _____

Medical/Behavioral Needs: _____

Check One Session: Sunday 10 am – 12:30 pm (K-8) Monday 4:15 pm – 6:15 pm (K-8)
 Home-Based Program (K-8)

Check if this student will be preparing for First Communion (2nd) or Confirmation (8th) during the 2019-2020 school year.

Check if this student is new to our program. Include a copy of her/his baptismal certificate if not baptized at Saint Anne or Saint Winifred.

Student 5 Information

Name: _____ Date of Birth: _____ Gender: _____

School District: _____ Grade in Fall 2019: _____

Medical/Behavioral Needs: _____

Check One Session: Sunday 10 am – 12:30 pm (K-8) Monday 4:15 pm – 6:15 pm (K-8)
 Home-Based Program (K-8)

Check if this student will be preparing for First Communion (2nd) or Confirmation (8th) during the 2019-2020 school year.

Check if this student is new to our program. Include a copy of her/his baptismal certificate if not baptized at Saint Anne or Saint Winifred.

Permission, Verification, and Fees

I DO or DO NOT (circle one) give permission for my child's picture to be used in media presentations of activities publicizing Saint Paul of the Cross and/or Saint Paul of the Cross Faith Formation program. Such presentations may include captions identifying the activity and the child by first name. Media presentations may include (but are not limited to): bulletin announcements, newsletters, social media posts, newspaper articles, and website photos.

I hereby verify that the above information is accurate to the best of my knowledge.

Parent/Guardian Name

Parent/Guardian Signature

Date

Class fees help our program pay for textbooks, supplies, and other materials. Please include payment with your completed registration form. Checks can be made payable to St. Anne Parish. Please write "Faith Formation Registration" in the memo. No child will ever be turned away for financial reasons - scholarships are available. Please contact our office to learn more.

One Child (\$80)

Two or More Children (\$100)

Requesting Scholarship