

ST. JAMES CATHOLIC CHURCH  
Office of Religious Education  
115 East Delaware Ave., Pennington, NJ 08534  
(609) 737-2717 e-mail: [stjamesedu@gmail.com](mailto:stjamesedu@gmail.com)  
website: stjames-nj.org

OFFICE USE ONLY:  
Date Received: \_\_\_\_\_  
Amt. Enclosed \_\_\_\_\_  
Check # \_\_\_\_\_

## Religious Education 2010-2011 STUDENT REGISTRATION FORM

*Note: Families must be registered at St. James Church prior to registering for Religious Ed. classes*

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### FAMILY INFORMATION

(\*required field) (Please Print)

\*Last Name (student's): \_\_\_\_\_

\*E-Mail Contact: \_\_\_\_\_ \*Home Phone: \_\_\_\_\_

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

\*Father's Name: \_\_\_\_\_ Religion: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

\*Mother's Name: \_\_\_\_\_ Maiden Name: \_\_\_\_\_ Religion: \_\_\_\_\_  
Work/Cell Phone: \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

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### REGISTRATION FEES

**Kindergarten Classes: \$50 per child**

**Family Center Classes & Home Study:**

**Grades 1 & 3-6** \$90 per child (return form by June 30) - max. fee \$300 per family;  
\$110 per child (return form after June 30) - max fee \$330 per family;  
**Grades 2 & 7** \$100 per child (sacramental prep)

**Grades 2 & 7 Catholic School Students: NO FEE**, but students must be registered in order to participate in the reception of First Holy Communion and Confirmation.

**If a parent is a teacher in the Family Center - the cost is \$25.00 per child**

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### CLASSROOM INSTRUCTION

***Students in Grades 1 & 2, 6 & 7 must attend classes in the Family Center***

**Grade K** 1<sup>st</sup> & 3<sup>rd</sup> Sunday during 9:45 and 11:30 Masses

**Grades 1 – 4** Tuesday - 4:30-5:45pm

**Grades 5, 6, 7** Tuesday – 7:00-8:15pm

**Grades 1 – 4** Wednesday - 4:30-5:45pm

**Grades 5, 6, 7** Wednesday – 7:00-8:15pm

**Grades 3 – 6** Thursday – 4:30-5:45pm

***CATECHISTS ARE ALWAYS NEEDED.*** If you are interested in sharing your faith with our children, please call the Religious Ed. Office at 609-737-2717 or e-mail [stjamesedu@gmail.com](mailto:stjamesedu@gmail.com)

FAMILY NAME: \_\_\_\_\_

**STUDENT INFORMATION:** (\*required field)

1. \*Child's Name: \_\_\_\_\_

\*CCD Grade Level in Sept.: \_\_\_\_\_ \*Family Center Class Day/Time: \_\_\_\_\_  
or Home Study: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Baptized?: yes no *(circle one)* \*\*Baptism Church: \_\_\_\_\_

Allergies? \_\_\_\_\_

Special learning need? *(ADD, reading disability, etc.)* \_\_\_\_\_

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2. \*Child's Name: \_\_\_\_\_

\*CCD Grade Level in Sept.: \_\_\_\_\_ \*Family Center Class Day/Time: \_\_\_\_\_  
or Home Study: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Baptized?: yes no *(circle one)* \*\*Baptism Church: \_\_\_\_\_

Allergies? \_\_\_\_\_

Special learning need? *(ADD, reading disability, etc.)* \_\_\_\_\_

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3. \*Child's Name: \_\_\_\_\_

\*CCD Grade Level in Sept.: \_\_\_\_\_ \*Family Center Class Day/Time: \_\_\_\_\_  
or Home Study: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Baptized?: yes no *(circle one)* \*\*Baptism Church: \_\_\_\_\_

Allergies? \_\_\_\_\_

Special learning need? *(ADD, reading disability, etc.)* \_\_\_\_\_

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4. \*Child's Name: \_\_\_\_\_

\*CCD Grade Level in Sept.: \_\_\_\_\_ \*Family Center Class Day/Time: \_\_\_\_\_  
or Home Study: \_\_\_\_\_

\*Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_ \*Sex: \_\_\_\_\_

\*Baptized?: yes no *(circle one)* \*\*Baptism Church: \_\_\_\_\_

Allergies? \_\_\_\_\_

Special learning need? *(ADD, reading disability, etc.)* \_\_\_\_\_

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\*\*If any of your children were baptized outside of this parish (St. James), and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.