

St. John the Evangelist Catholic Church
2022/23
Catechism Classes/Sacrament Preparation



Train a child how to live the right way. Then even when he is old, he will still live that way.
~Proverbs 22:6

Please check the box for registration for catechism class and sacrament preparation for 2022/23 school year. REGISTRATION FORMS ARE DUE BY August 30, 2022

Catechism Class

Children's Choir

REGISTRATION FEE: \$40

NOTE: There is a registration fee of \$40 per child to cover workbooks for the program. Books will be ordered by the parish.

As part of the children's catechism class we offer children's choir throughout the year for special Christmas and Easter celebrations in the parish.

Sacrament Preparation:

Reconciliation and First Communion

Confirmation

Please prioritize the day of the week or weekend that would work best for your children to attend Catechism classes. Please note the grade level per weekday/weekend if you have multiple children.

- _____ Monday
- _____ Tuesday
- _____ Wednesday
- _____ Thursday
- _____ Friday
- _____ Saturday
- _____ Sunday (Prior to Mass)
- _____ Sunday (afternoon)

The church recognizes that parents are the primary catechists of their children and responds by aiding families to grow in knowledge and love of Jesus Christ through providing opportunities for catechesis, worship, prayer, mission and witness.

Please print your name in the areas that you could help make a difference:

Catechist (training, faith formation and ongoing support provided) _____

Grade you would prefer to teach (in order of priority) _____

Substitute Catechist _____

Assisting Catechist _____

Support Catechists/Children with Prayer _____

I would like the pastor O or coordinator O to contact me regarding _____

FAMILY INFORMATION

I understand the personal and health information collected will be kept secure and access limited. All information is managed according to the Privacy Act and the PIPEDA. I consent to the use of my child(ren)'s name and/or picture in printed and electronic materials by parishes, schools, dioceses and organizations for promotional or publicity purposes.

Date _____ Parent/Guardian Signature _____

Last Name: _____

Manitoba Medical Family #(6 digits) _____

Home Address: _____ Postal Code _____

Home Phone: _____ Cell Phone: _____

E-Mail address: _____

Alternate Name and Number in case of emergency during session: _____

CHILD DATA: Please list children (oldest to youngest) and *print full names as you want it to appear on any certificates.* Please provide copies of baptism certificates:

Child's Full Name: _____ **Date of Birth:** _____

Male or Female _____ Grade Fall ____: _____ School: _____

Check sacraments received: ___ Baptism ___ Reconciliation ___ Eucharist ___ Confirmation

Name & Address of Parish of Baptism _____

Manitoba Medical Personal #(9 digits) _____

Child's Full Name: _____ **Date of Birth:** _____

Male or Female _____ Grade Fall ____: _____ School: _____

Check sacraments received: ___ Baptism ___ Reconciliation ___ Eucharist ___ Confirmation

Name & Address of Parish of Baptism _____

Manitoba Medical Personal #(9 digits) _____

Child's Full Name: _____ **Date of Birth:** _____

Male or Female _____ Grade Fall ____: _____ School: _____

Check sacraments received: ___ Baptism ___ Reconciliation ___ Eucharist ___ Confirmation

Name & Address of Parish of Baptism _____

Manitoba Medical Personal #(9 digits) _____

Do any of the children have special needs (health, academic, allergies, medications, learning challenges, etc.)?

Y O N O Please give name and indicate needs so that we may better respond to the child's needs.

Please list child(ren)'s name and extra curricular activities:

Will any of these activities interfere with catechism attendance? Please explain so that the catechist may help you attend to your child's ongoing faith formation accordingly. _____

Child(ren)'s living arrangements: with both parents, mother, father, shared custody, etc. (Please provide copies of any necessary court orders or legal documents that are needed for our records.)

Please list any other information the pastor, coordinator or catechist should be aware of so that they may share the faith in a manner that will be meaningful to the children (such as recent loss of loved one, changes in family relationships, etc.) _____

PARENT DATA:

Relationship (father, mother, step-parent, guardian): _____

Name (include maiden name for mother): _____

Phone # & address is different from child(ren)'s _____

Religion, hobbies, interests, talents, occupation: _____

Relationship (father, mother, step-parent, guardian): _____

Name (include maiden name for mother): _____

Phone # & address is different from child(ren)'s _____

Religion, hobbies, interests, talents, occupation: _____

HOW WOULD YOU LIKE TO BE CONTACTED REGARDING SCHEDULES OR CHANGES TO CLASSES FOR CATECHISM?

TEXT Message: _____

Email: _____

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