

SCHEDULE OF CLASSES FOR 2016-2017

HOLY ANGELS FAITH FORMATION CAMPUS

Please keep in mind that registrations are on a “first come, first served basis,” so it is important to register now for the day and time of the class you wish!

SUNDAYS

Grades 2 through 6 – Session I: 10:30-11:45AM

SECOND SUNDAY OF THE MONTH

Grades 1 (Family Catechesis) 10:00AM – Faith Formation Bldg.

INTERGENERATIONAL CLASS

THIRD SUNDAY OF THE MONTH

Grades 3 through 6 – Session I: 10:30AM – Faith Formation Bldg.

ALTERNATE SUNDAYS

Grades 7 and 8

7:00pm – Faith Formation Bldg.

(FOLLOWING 6:00 PM MASS IN THE WORSHIP CENTER)

*SUMMER SESSION

JULY 11th thru JULY 22nd

Grades 2 through 8:30AM–12:30PM– Faith Formation Bldg.

*SUMMER TUITION AND SACRAMENT FEE MUST BE PAID BY JUNE 30TH

We offer Family Catechesis for our children in First Grade.
You must register your child(ren) to be a part of our program.
Please call our office to make an appointment.

PRINT THE 2-PAGE REGISTRATION FORM BELOW

AND

RETURN TO ADDRESS AT THE BOTTOM OF PAGES

FAMILY REGISTRATION FORM

Family Name _____

Address _____
(Street) (City) (State and Zip Code)

Phone _____ Cell Phone _____

E-mail address _____

<u>Child/Children Name</u>	<u>Grade</u>	<u>Session</u>
		SUN. 10:30-11:45AM
		GR. 1 10:30AM
		GR. 3-6 10:30AM
		GR. 2-8 SUMMER SESSION

FEE SCHEDULE

1 CHILD	\$150
2 CHILDREN	\$225
3 OR MORE CHILDREN	\$275

Sacrament Fees are to be paid at the **beginning** of the year. They are as follows:

1st Reconciliation and Eucharist Fee **\$50** Confirmation Fee (7th Grade) **\$60**

*Please keep in mind that registrations are on a "first come, first served basis," so it is important to register **now** for the day and time of the class you wish!*

No child will be denied religious education due to finances. Payment plans are available to accommodate family budgets. If finances area concern, contact Irene Clark, C.R.E.

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AMOUNT ENCLOSED _____

PLEASE RETURN AS SOON AS POSSIBLE

**INDIVIDUAL STUDENT
REGISTRATION FORM**

Date _____

Name _____
(LAST) (FIRST) (MIDDLE)

Address _____
(STREET) (CITY) (STATE AND ZIP CODE)

Phone _____ Cell Phone _____ E-mail _____

Date & Place of Birth _____
(DATE) (CITY/STATE)

Parish where currently registered _____
(PARISH NAME) (CITY/STATE)

Baptism _____
(DATE) (PARISH NAME) (CITY/STATE)

Penance _____
(DATE) (PARISH NAME) (CITY/STATE)

Communion _____
(DATE) (PARISH NAME) (CITY/STATE)

Confirmation _____
(DATE) (PARISH NAME) (CITY/STATE)

Father's Name _____ Religion _____

Mother's Maiden Name _____ Religion _____
(FIRST NAME AND MAIDEN)

Special Information _____
(MEDICAL CONDITIONS, LEARNING DISABILITIES, ETC.)

Grade _____

Time _____

HOLY ANGELS PARISH – FAMILY FAITH FORMATION OFFICE
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