

ST. CHARLES RELIGIOUS EDUCATION PROGRAM
200 PENN AVENUE
STATEN ISLAND, N.Y. 10306
718-979-6800 FAX 718-987-8158
STCHARLESCCD10306@GMAIL.COM

RE-REGISTRATION 2016-2017

Dear Parents/Guardians,

Thank you for allowing us to work with your children this year. We are very appreciative of your cooperation in all matters of your child's religious education.

Please be advised that R.E.P. classes at St. Charles for Grades 1 – 5 will be held on Wednesdays, from 3:45 P.M. to 5:15 P.M. Grades 6 and 7 will be held on Monday from 3:45 P.M. to 5:15 P.M.

Classes for Grades 6 & 7 will begin on Monday, September 19, 2016, and classes for Grades 1-5 will begin on Wednesday, September 21, 2016. You will be notified by your child's teacher in September as to what class they have been placed and where line up will be.

Re-Registration Fees

	Early Bird Paid by May 25, 2016	Regular Fee May 26 – June 15	Late Fee September 8-22
1 Child	\$200.00	\$225.00	\$250.00
2+ Children	\$275.00	\$300.00	\$325.00

** Registration fees are non-refundable. This fee includes books.

** Sacramental fees are extra. At the mandatory fall 2016 Sacramental meetings, you will be advised of all Sacramental requirements.

** Mass Attendance: Weekend Mass attendance and Holy Days of Obligation is required. Student's mass attendance will be recorded. As Catholics, we are expected to meet these obligations.

** Required Forms: The Registration & Crisis Management forms must be filled out and returned to the Religious Education Office no later than **May 25, 2016**. Please complete your family's form and return it to the R.E.P. office with your payment in an envelope labeled "Registration" with your child's name and current class. If for any reason, you have a problem preventing you from registering at this time, please contact the R.E.P. office at 718-979-6800 or at the above listed e-mail address. **DO NOT** wait until May 25th to advise us of your situation.

We look forward to a successful year!

Sincerely,

Ms. Kerry Quinn
Coordinator of Religious Education

CRISIS MANAGEMENT

A Crisis Management Plan is in place for our Religious Education Program. Faculty and staff members know the procedure and necessary code words for a lockdown and a disaster plan. Students and staff are in the process of practicing such procedures. We have also purchased and stored provisions such as bottled water, snacks, and personal wipes for each student.

If there is a lockdown, NO ONE will be admitted into the building until an ALL CLEAR sign is given. The children will be supervised by the school personnel, even if it after our usual dismissal time. You must be patient for the welfare of your child/children.

In case of a disaster mode, all students and teachers will assemble in the lunchroom. Once gathered, all students and parents will follow the procedures below:

- 1. Teachers will give each student a name tag to wear.**
- 2. Parents or guardians must enter St. Charles School through the main entrance (Penn Ave.), sign in, and line up in the hallway.
You must have PHOTO I.D.**
- 3. Each parent will be sent to the specific area where their child/children will be located. You will then sign out your child/children and exit the building.**
- 4. You must remain calm and follow instructions.**

In case of an imminent threat before our program starts, the Religious Education Program will be cancelled and regular procedures for closing will be followed.

In case of an imminent threat to our school building during the Religious Education Program, the children will be taken into our church or schoolyard. Once again, they will be supervised by their teachers and school staff. In this situation, when your child/children attending the St. Charles Religious Education Program, it is your responsibility to make arrangements for you or someone else to pick up your child/children from the sites mentioned above.

Please remind your child/children that in case of an emergency, they must move quickly and quietly, and listen carefully to all instructions from their teachers or school personnel. Our children's safety and well-being is our first priority in an emergency.

Please fill out the attached form printing as clearly as possible all requested information and return to us at the time you register your child/children.

SAINT CHARLES RELIGIOUS EDUCATION PROGRAM RE-REGISTRATION FORM

FAMILY INFORMATION

Parish Envelope #: _____

Address: _____ Apt: _____ Zip: _____

Listed Contact Phone: _____ Alternative Phone Number: _____

___ Use the above address for correspondences

Father's Full Name: _____ Religion: _____

Cell Phone: _____ E-mail Address: _____

Mother's Full Maiden Name: _____ Religion: _____

Cell Phone: _____ E-mail Address: _____

Step-parent's Full Name: _____ Religion: _____

Cell Phone: _____ E-mail Address: _____

Legal Guardian: ___ Both Parents ___ Single Parent ___ Other (Please complete the next line)

Name: _____ Religion: _____

Cell Phone: _____ E-mail Address: _____

Emergency Contact (not listed above):

Name: _____ Phone #: _____

Student(s) Information

1. Child's Full Name: _____

Religious Education Grade 2016 - 2017 1 2 3 4 5 6 7 Public School attending: _____

IEP ___ Explanation: _____

2. Child's Full Name: _____

Religious Education Grade 2016 - 2017 1 2 3 4 5 6 7 Public School attending: _____

IEP ___ Explanation: _____

3. Child's Full Name: _____

Religious Education Grade 2016 - 2017 1 2 3 4 5 6 7 Public School attending: _____

IEP ___ Explanation: _____

4. Child's Full Name: _____

Religious Education Grade 2016 - 2017 1 2 3 4 5 6 7 Public School attending: _____

IEP ___ Explanation: _____

FOR OFFICE USE ONLY

Registration Date: _____ Registration Fee \$ _____ Amount Paid \$ _____

Payment Method: CASH MONEY ORDER CHECK # _____

CRISIS MANAGEMENT INFORMATION

Family Name: _____ **Preferred Phone #:** _____

Student(s) Name:

1. _____ 2. _____ 3. _____ 4. _____

Mom's Cell #: _____ **Mom's Work**
#: _____

Dad's Cell #: _____ **Dad's Work**
#: _____

Only the following may pick up my child/children in case of an emergency.
There will be no exceptions.

Full Name: _____ **Phone #:** _____

Full Name: _____ **Phone #** _____

STAFF EMERGENCY USE ONLY – (DO NOT SIGN)

I am picking up the child/children listed above.

Signed: _____ **Phone #:** _____