

UPDATED: 9/18/18

Greetings New Families,

Welcome to Queen of Heaven Parish and Youth and Family Ministry. We are happy to have you as part of our family.

A registration form for our programs accompanies this letter. We have several options for you to choose from including a summer program for grades 6 – 10 in conjunction with 14 Holy Helpers.

- Traditional Program: grades PK – 5 meets Saturday from 9:45 – 11:15 a.m.
- EDGE – Grades 6 – 8, meets Tuesday evening from 7:00-8:30 (day of week subject to change).
- Life Teen: Grades 9 – 12, meets Sunday evenings starting with the 5:30 Mass and ending @ 8:30
- Home Study: available for all grade levels
- Family Program: all grades – meets once a month on Sunday morning between the 8 a.m. and 11:15 Masses; eight sessions from late September – April.
- Summer Program: grades 6 – 10 is June 21st, June 22nd, June 25th, June 26th 9:00 a.m. – 3:00 p.m. and June 27th from 9:00 a.m. – 1:30 p.m. **Please note: the Summer Program registration will be closed when classes are filled so if you are interested in this, please call the office to check availability if registering after the May 15th deadline.** Payment in full for Summer Program **only** is necessary, unless other arrangements have been made.
- Confirmation: grade 11 or 12 – meets once or twice a month from October through February with Confirmation in the spring. There is a parent/candidate meeting in late September.

FEE INFORMATION:

All program fees, with the exception of the Summer Program, may be paid between now and the first day of class in September. If this is a problem for anyone please call us. We are happy to make whatever arrangements may be necessary to assist you. **The fees are as follows:**

One child:	\$50.00*
Two children:	\$85.00*
Three or more children:	\$110 (family maximum)
Family Program:	\$60.00/family
Home Study:	\$50.00/family
Confirmation:	\$50.00*

Please note: Summer Program fee is \$60.00 per student. No discounts can be applied.

**can be included in family maximum of \$110.00*

As always, we are looking for volunteers to assist in our various programs next year as catechists, aides, special events, etc. If you feel God is calling (or gently nudging) you to share your faith with our students, please contact us and we will help you get started.

If you have any questions about our program, volunteering or the registration process, please call the office at 675-3714 or email youthfamilyinfo@qofhchurch.org.

Peace,
Barbara Maloney, Director, Family Ministry
Chris Wilson, Director, Youth Ministry
Jennifer Frost, Assistant, Youth & Family Ministry Dept.

We are registering for:

(check all that apply)

Traditional PK-5

Family Program PK-10

Home Study Gr.K-10

Life Teen Gr. 9-12

Edge Gr. 6-8

Summer Program Gr.6-10

Confirmation Gr. 11

2018-2019 New Family Registration Form
Queen of Heaven Youth & Family Ministry
839 Mill Rd. Rm. 112, West Seneca, NY 14224
Pre-K thru 12th

for office use

fee pd _____

amt. _____

date _____

DATE: _____

Family Name _____ Phone _____

Address _____ Parish registered at _____

City/Town _____ State _____ Zip Code. _____

When sending mail, address to (Please circle):

Mr.& Mrs. Mr. Mrs. Miss Ms. Dr.& Mrs. Dr.& Mr. Other _____

Mother/Maternal Guardian Information Cell Phone _____

Last _____ First _____ M _____ Maiden _____

Address _____ City _____ St _____ Zip Code _____

Religion: _____ email: _____

Place of Employment _____ Work Phone _____

Marital Status: Married Divorced Widow/Widower (Optional) Single Separated

Father/Paternal Guardian Information Cell Phone _____

Last _____ First _____ M _____

Address _____ City _____ St _____ Zip Code _____

Religion: _____ email: _____

Place of Employment _____ Work Phone _____

Marital Status: Married Divorced Widow/Widower(Optional) Single Separated

Please indicate in which area you would be willing to volunteer your assistance by initialing below:

_____ Catechist _____ Catechist Aide _____ Special Events _____ Office Help _____ Fundraisers

Are there any situations (births, deaths, illness, family changes, etc.) that would affect your child's life that we need to be aware of? This information will help us to respond better to his/her/their needs.

student information on next page

Student _____ Phone # _____
 Last First Middle name
 Address _____
 City/Town _____ State _____ Zip Code _____
 Date of Birth _____ Grade ____ as of September
 Baptized at (Parish) _____ City/State _____ Yr. _____

Office Use Only:
**Date enrolled in
 Queen of Heaven
 Faith Formation:**

Date Withdrawn

**Reason
 Withdrawn**

Copy of baptismal certificate is required for our files if not baptized at Queen of Heaven.

First Reconciliation at (Parish) _____ City/State _____ Yr. _____
 First Eucharist at (Parish) _____ City/State _____ Yr. _____

Presently attending which public school _____
 Parish where student last attended faith formation classes: _____ Grade ____
 Please identify any challenges or special need your child has that it will be helpful for us to know
 (i.e., food allergy, hearing, sight, etc.) _____

+++++
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