

Queen of Heaven Youth and Family Ministry  
839 Mill Rd., West Seneca, NY 14224

www.qofhchurch.org  
Phone: 716-675-3714 Fax: 716-674-2793

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 21<sup>st</sup>, June 22<sup>nd</sup>, June 25<sup>th</sup>, June 26<sup>th</sup> 9:00 a.m. – 3:00 p.m. and June 27<sup>th</sup> 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 15<sup>th</sup> 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:	\$60.00/family
Confirmation:	\$60.00*

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

*\*can be included in family maximum of \$108.00*

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](mailto:youthfamilyinfo@qofhchurch.org).

Peace,  
Barbara Maloney, Director, Family Ministry  
Betsy Amico, Director, Youth Ministry  
Jake Druzvik, 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 12<sup>th</sup>**

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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