



Welcome to St. Luke Religious Education,

Registration for St. Luke the Evangelist Catholic Community Religious Education 2021/2022 will begin April 30, 2021. You can only access the registration materials through our website.

www.stluketemplecity.org. All forms are fillable.

How to Register

Step one

- Download the 2021-2022 Program Packet. Fill out forms online
- Print them and sign them where indicated
- Please provide a copy of your child's Baptismal Certificate
- A deposit of \$40.00 must be received with each registration

You can make a deposit by check or you can pay by credit/debit card through our online giving.

Go to our website www.stluketemplecity.org click on "Make a Donation" (Picture of St. Luke Statue)

Enter the amount next to the FEES-Religious Education fee payments only Tab. *I will be notified via email of your deposit/payment.*

Step Two

- Place registration forms in an envelope.
- Take them or mail them to the Pastoral Office:

St. Luke the Evangelist Catholic Community
Attn: Barbara Hansen
5605 Cloverly Ave, Temple City, CA 91780

- or scan and email them to Barbara@stluketemplecity.org if using online giving option

Once the registration materials and deposit are received you will be contacted by the Religious Education Office.

If you have any question call/email Barbara Hansen

Thank you for your interest in our Religious Education Program. We are blessed to accompany you and your family on your faith journey.

God Bless,

Barbara Hansen
Director of Religious Education
626 291-5900 Ext 227
213 948-3307

Barbara@stluketemplecity.org
stlfamilycatechesis@gmail.com



ST. LUKE CATHOLIC COMMUNITY 2021-2022

RELIGIOUS EDUCATION Program Description & Important Dates PRESCHOOL, HOME CHURCH, FAMILY CATECHESIS, ADULT/TEEN CONFIRMATION

FAMILY CATECHESIS

Preschool (Ages 3, 4, and 5 years old)

Beginning (1st grade, 2nd grade, 3rd grade) First year of RE

Continuing (4th grade, 5th grade, 6th grade & 3rd grade if they have celebrated
First Holy Communion)

Middle School

Sac Elementary

Sac HS/MS

Adults and Adult Confirmation

Meets via zoom 11:30 AM

First class: You will receive an email

*Child must be 3 yrs. old by September 1, 2021

*Child must be able to use restrooms on their own

Calendared Sunday mornings 11:30am – 1:00pm
via Zoom/Google Classroom

ADULT CONFIRMATION

See Family Catechesis

CONFIRMATION (Teens)

YEAR I

YEAR II

You will receive an email with the dates and times of your sessions

Calendars for the above-mentioned programs will be found on our parish website www.stluketemplecity.org.

All registration forms can be accessed through our website
www.stluketemplecity.org

Religious Education registration forms can be mailed to the Pastoral Office or
dropped in the office mailbox. Forms must be received by September 10th.
Upon receipt of all forms and deposits you will be contacted.

Make checks payable to St. Luke RE or make payments thru our
online giving program using Religious Education Tuition.

If there is any questions regarding registration or program fees,
please contact the RE office 626 291-5900 or email

barbara@stluketemplecity.org

Class size is limited

Please note: We have ONE registration form for an entire family.

*Fees reflect the amount per child the parish pays to run these programs.
(Books, classroom materials, insurance and emergency supplies)*

Family Catechesis/Home Church	\$150.00 per Family
Adult/Teen Confirmation	\$ 95.00 per Student

Sacramental Fees

Fees reflect additional supplies necessary for sacrament

1st Communion & YR II Confirmation fee: \$90.00 per student

Confirmation Retreat

Fees reflect necessary supplies for Retreat

(Religious Materials, Meals & Transportation when necessary)

YR I	\$150.00 per student includes Parent/Teen Retreat fee
YR II	\$200.00 per student

\$40.00 Non-Refundable deposit required at time of registration; this deposit will be applied to registration fees. A schedule of remaining payments should be arranged with the RE department before the first day of class.

\$25.00 returned check fee will be charged on any returned check and cash or money orders will be required.

To Register for St. Luke Religious Education Programs:

Complete all necessary forms:

- Registration Form
- Emergency Release Form Photo permission, TTS, Emergency contact
- Parish Registration
- A copy of students Baptismal Certificate
- A copy of First Communion Certificate for those registering for Confirmation

For those in Confirmation YR 2/Adult Confirmation the following are also required at time of registration

- Confirmation Sponsor Eligibility Form
- Parent /Teen Retreat (Unless attended Confirmation Yr. 1)

Meetings

A mandatory Sacramental Parent meeting for those registering for Communion will be held Zoom invitation to follow once registration materials are received

A mandatory Parent/Teen information Session for those attending Confirmation will be held. Zoom invitation to follow once registration materials are received.

St. Luke the Evangelist Catholic Community
Religious Education
Family Catechesis; Adult/Teen Confirmation

GENERAL REGISTRATION INFORMATION

PARENT OR GUARDIAN INFORMATION

Father or Guardian First and Last Name		Email
Address	City	Zip Code
Home Phone #	Work Phone #	Cellphone #
Mother or Guardian First and Last Name		Email
Address (if different)	City	Zip Code
Home Phone #	Work Phone #	Cellphone #

INFORMATION FOR CHILD OR YOUTH #1

First Name	Middle Initial	Last Name	Male Female
Cellphone #	Date of Birth	Age	
Name of School	City	Grade	

Do you have any of the following documents for your child/youth? If yes, please attach a copy of the document(s) to this form.

Birth Certificate	Yes <input type="checkbox"/>	Baptismal Certificate	Yes <input type="checkbox"/>	1 st Comm. Certificate	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>

What is the last Year of Religious Education your child has attended? _____

Living Arrangements / With both Parents / With Father / With Mother / With Guardian /

Are there any custody issues or a restraining order in place? Yes No

If "yes", enclose a copy of the most recent applicable court order(s).

Given the nature of the program, does your child or youth have any physical, mental, emotional, cognitive, or other limitations or restrictions that would require the parish to make a minor adjustment to enable your child or youth to participate? Yes No

If "yes", what type of restriction does your child or youth have or what adjustment(s) will be needed?

INFORMATION FOR CHILD OR YOUTH #2

First Name	Middle Initial	Last Name	Male Female
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Cellphone #	Date of Birth	Age
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Name of School	City	Grade
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Do you have any of the following documents for your child/youth? If yes, please attach a copy of the document(s) to this form.

Birth Certificate	Yes <input type="checkbox"/>	Baptismal Certificate	Yes <input type="checkbox"/>	1 st Comm. Certificate	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>

What is the last Year of Religious Education your child has attended? _____

Living Arrangements / With both Parents / With Father / With Mother / With Guardian /
Are there any custody issues or a restraining order in place? Yes No

If "yes", enclose a copy of the most recent applicable court order(s).

Given the nature of the program, does your child or youth have any physical, mental, emotional, cognitive, or other limitations or restrictions that would require the parish to make a minor adjustment to enable your child or youth to participate? Yes No

If "yes", what type of restriction does your child or youth have or what adjustment(s) will be needed?

INFORMATION FOR CHILD OR YOUTH #3

First Name	Middle Initial	Last Name	Male Female
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Cellphone #	Date of Birth	Age
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Name of School	City	Grade
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Do you have any of the following documents for your child/youth? If yes, please attach a copy of the document(s) to this form.

Birth Certificate	Yes <input type="checkbox"/>	Baptismal Certificate	Yes <input type="checkbox"/>	1 st Comm. Certificate	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>

What is the last Year of Religious Education your child has attended? _____

Living Arrangements / With both Parents / With Father / With Mother / With Guardian /
Are there any custody issues or a restraining order in place? Yes No

If "yes", enclose a copy of the most recent applicable court order(s).

Given the nature of the program, does your child or youth have any physical, mental, emotional, cognitive, or other limitations or restrictions that would require the parish to make a minor adjustment to enable your child or youth to participate? Yes No

If "yes", what type of restriction does your child or youth have or what adjustment(s) will be needed?

INFORMATION FOR CHILD OR YOUTH #4

First Name	Middle Initial	Last Name	Male
			Female

Cellphone #	Date of Birth	Age
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Name of School	City	Grade
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Do you have any of the following documents for your child/youth? If yes, please attach a copy of the document(s) to this form.

Birth Certificate	Yes <input type="checkbox"/>	Baptismal Certificate	Yes <input type="checkbox"/>	1 st Comm. Certificate	Yes <input type="checkbox"/>
	No <input type="checkbox"/>		No <input type="checkbox"/>		No <input type="checkbox"/>

What is the last Year of Religious Education your child has attended? _____

Living Arrangements / With both Parents / With Father / With Mother / With Guardian /
Are there any custody issues or a restraining order in place? Yes No

If "yes", enclose a copy of the most recent applicable court order(s).

Given the nature of the program, does your child or youth have any physical, mental, emotional, cognitive, or other limitations or restrictions that would require the parish to make a minor adjustment to enable your child or youth to participate? Yes No

If "yes", what type of restriction does your child or youth have or what adjustment(s) will be needed?

PARENT OR GUARDIAN SIGNATURE

DATE

By signing this document, I give permission for my child/children/youth to participate in this faith formation program, whether conducted onsite or online.

St. Luke the Evangelist Catholic Community
Religious Education

Emergency Information Form

Family Name

If a parent or guardian can't be reached in an emergency, please contact::

First and Last Name	Phone #	Relationship to child or youth
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First and Last Name	Phone #	Relationship to child or youth
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First and Last Name	Phone #	Relationship to child or youth
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First and Last Name	Phone #	Relationship to child or youth
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List any medical condition which restricts physical activity or requires special attention or minor adjustments. Include conditions such as asthma or allergies (e.g. peanuts, bee stings, etc.) If none, please indicate "none".

Does your child or youth take any medications?

Earthquake or Disaster Release

Name of Child or Youth #1

Name of Child or Youth #2

Name of Child or Youth #3

Name of Child or Youth #4

This section below must be completed by a parish staff or leader, in the event of an earthquake or other disaster.

The child/children listed above was/were released to:

Name: _____

Date & Time: _____ ID Verification _____

Location to where the child(ren) or youth was taken:

Parish staff or leader releasing the child:

Parent or Guardian Signature

By signing this form, I understand that the parish does not assume responsibility for payment of physicians. However, in an emergency the parish may choose a physician. In an emergency, I give the parish permission to have my child(ren) or youth receive medical treatment.

Signature

Date

PARENT/GUARDIAN RELEASE FOR STUDENT OR MINOR

This section to be completed by the Archdiocesan entity sponsoring the activity:

Name of Location: ***St. Luke the Evangelist Catholic Community Religious Education***
Family Catechesis-Adult or Teen Confirmation

The Location intends to use your child’s image, name, voice and/or work for noncommercial purposes relating to the event(s) or activity(ies) identified below.

Description of events/activities to which this Release applies:

Calendared classes/Retreats
_____via Zoom
_____Powerpoint presentations
_____Google Classroom

Duration of Release: ***September 2021- June 2022***

NON COMMERCIAL PHOTO RELEASE

This section to be completed by Parent/Guardian:

I, _____ am the parent/guardian of
_____, a minor.

I hereby authorize the Location to use the following personal information about my child:
(Please initial the applicable boxes)

Image: yes no **Voice:** yes no **Name:** yes no **Work:** yes no

I understand and agree that my child’s image, voice, name and/or work (“Personal Information”) relating to the events or activities described above will be used for noncommercial purposes, including, but not limited to, publicity, exhibits, electronic media broadcasts or research. I understand and agree that my child’s Personal Information may be copied, edited and distributed by the Location in publications, catalogues, brochures, books, yearbooks, magazines, exhibits, films, videotapes, CDs, DVDs, email messages, websites, or any other form now known or later developed (“Materials”).

The Location may use the Personal Information at its sole discretion, with or without my child’s name or with a fictitious name, and with accurate or fictitious biographical material. The Location will not use the Personal Information for improper purposes or in a manner inconsistent with the teachings of the Roman Catholic Church.

I waive any right to inspect or approve any Materials that may be created using the Personal Information now and in the future. In exchange for the opportunity given to my child by the Location to participate in the activity, I agree that neither I, nor my child, will receive monetary compensation, royalties or credit. I understand and agree that the Location shall be the owner of all right, title and interest, including copyright, in the photographs, electronic recordings and Materials. If the Location intends to use the Materials for a commercial purpose, I will be provided at that time with information about the terms of the commercial use.



I hereby waive, release and forever discharge any and all claims, demands, or causes of action against the Location and its affiliated entities, employees, agents, contractors and any other person, organization, or entity assisting them with the photography, electronic recording or Materials, for damages or injuries in any way related to, or arising from the photography, electronic recording or Materials, or the use of the Personal Information, and I expressly assume the risk of any resulting injury or damage.

I further understand and agree that this Authorization remains in effect until it is withdrawn in writing. I understand that if I change my mind about this Authorization, that I will submit another, new authorization form to the Location. However, my new authorization will not have the effect of revoking this Authorization, and the Location will have no duty or obligation to make any changes or alterations to any Materials that may have been prepared based on this Authorization.

I represent that I have read this Authorization, understand the contents and am able to grant the rights and waivers it contains. I understand that the terms of this Authorization are contractual and not mere recitals. I am signing this document freely and voluntarily.

Signature: _____ Date: _____

Print Name: _____ Relationship to Child: _____

Address: _____

Telephone: _____ Cellphone: _____

Email: _____

Name of Child: _____ Age: _____

Name of Child: _____ Age: _____

COMMERCIAL PHOTO RELEASE:

Parent Authorization, Consent and Release

The undersigned parent/guardian hereby authorizes and consents that St. Luke Religious Education Staff be permitted to use and publish for publicity and promotion purposes, the name and likeness of my child(ren) _____, or for any other lawful purpose whatsoever, including electronic media.

Also, if we have inadvertently posted a photo of your child(ren) and you have indicated a desire for them not to be posted, please notify the Parish Office immediately either by phone or e-mail with a description of the photo and we will remove it as soon as possible.

Parent Name: (Please Print) _____

Parent Signature: _____ Date: _____



Empowering God's Children and Young People©
Permission Slip
2021 – 2022

To: Parents/Guardians

From: St. Luke the Evangelist Catholic Community Religious Education

Subject: Empowering God's Children and Young People© Safety Program

We at **St. Luke the Evangelist Catholic Community Religious Education** are committed to your child's safety and well-being. There are daily reports of child abuse, both sexual and other forms in our society. Therefore, we recognize how important it is to "empower" our children and young people with the knowledge and understanding of ways to keep themselves and others safe from potential harm.

The *Empowering God's Children and Young People© Safety Program* is provided by the Archdiocese of Los Angeles as an ongoing effort to educate children and young people through classroom lessons and activities on ways to maintain their own personal safety. It is based on catechetical principals to help them know they are loved by God and that He wants them to be healthy and safe.

The *Empowering God's Children and Young People© Safety Program* will be presented to our students during the month of **November**. Each lesson includes video presentations, classroom discussion, individual and group activities, as well as a "Take Home Activity" for students to complete with a parent/guardian.

Parents/guardians seeking additional information regarding this program or who would like to review the materials/videos, please feel free to contact **Barbara Hansen or Ivonne Melendrez 626 291-5900**.

I understand that for my child to participate in the *Empowering God's Children and Young People© Safety Program*, I need to fill out and return this Parent Permission Form. I am specifically giving permission for the *Empowering God Children and Young People© Safety Program* to be presented to my child.

Child's Name (printed): _____

Parent/Guardian Name (printed): _____

Parent/Guardian Signature: _____

Date: _____