

**Religious Education Office
St. Cecilia Church
434 Norton Rd.
Columbus, Ohio 43228**

July 2009

Dear Parents,

It is with great excitement that I look forward to another year at St. Cecilia's and working with all of you for the Religious Education and Catholic Formation of your children. What a great privilege it is to be called "Children of God", and yet that is what we are. Our common parent is God, Our Father, who loves each of us uniquely and totally. Helping *our* children come to know Him, love Him, and grow to live in relationship with Him is our highest calling as parents and educators. Together may we make this a very blessed and fruitful year for our children and our families.

Our Religious Education classes will begin September 13 & 14. **Please note that beginning this year, all of our Sunday classes, including our Pre-School and Kindergarten classes, will be held from 10:45 –11:45 am.** As has been our custom at St. Cecilia's, our Parent Orientation meetings will be held once again on the first day of classes. Please come to the Parish Center as a family. A brief welcome will be given to all before students are called by grade to accompany their teachers to their classrooms. A *brief* parent meeting will follow, after which parents are invited and encouraged to proceed to their children's classrooms. This will provide an opportunity to meet the catechists (teachers) personally. You will also hear firsthand their plans for the year and preview an outline for this year's course of study. Additional time will be allotted at the end of classes for parents with more than one child in the program to meet with all teachers. Any questions you have may be addressed at this time.

New to our registration forms last year was a request for email addresses. This has become an invaluable tool for communicating with parents in a timely and efficient manner. I thank you in advance for supplying us with your address if you have one. Please feel free to contact me via email as well, should you ever have any questions or concerns. I will respond as quickly as possible.

Our world pulls us in many directions, and to an overabundance of commitments and activities. Our relationship with God who calls us to Himself, and to whom we shall all return, too easily gets "put on the back burner". To remind us of His great love for us and to help us fight against the pulls of the world, he gave us the First Great Commandment: ***"Love the Lord, your God with all your heart, with all your soul, with all your mind, and with all your strength"*** (Mk.12:30). May this be our common goal and greatest joy in the coming year!

Sincerely in Christ,

Mrs. Kathleen Maggied
Director of Religious Education
kmaggied@saintceciliachurch.org

If you have more than 3 children to register, please use an additional sheet. Thank you!

PSR FEE STRUCTURE FOR 2009-2010

\$110 for one child = (\$50 Registration + \$ 60 Tuition)

\$220 for two children = (\$100 Registration + \$120 Tuition)

\$300 for three children = (\$150 Registration + \$150 Tuition)

\$400 for four children = (\$200 Registration + \$200 Tuition)

\$400 is our Family Cap, which applies to a family with 4 or more children in the program

Religious Education Office

St. Cecilia Church

Application Form for PSR Tuition Assistance

The mission of St. Cecilia's Religious Education Program is to proclaim Christ's message, and to help our children grow in their relationship with Jesus Christ. While tuition is necessary for the operation of our program, it is our desire that no child is omitted from the program due to difficult financial situations. If your family has a genuine need of our assistance in this area, we are pleased to help you to the best of our ability.

Name: _____

Title

First

Last

Street Address

City

Zip

Home Phone

Cell Phone (opt.)

Work Phone

Children in Religious Education Program:

Name: _____ Age _____ Grade _____

Name: _____ Age _____ Grade _____

Name: _____ Age _____ Grade _____

Name: _____ Age _____ Grade _____

Total Tuition Due (see chart): \$ _____

Amount I am able to pay: \$ _____

Tuition Assistance Needed: \$ _____

Please write a brief explanation of your need for assistance:

Signature

Date

If requesting assistance, please return this form with your 2009-10 PSR Registration Form. Thank You!

**EMERGENCY MEDICAL RELEASE FORM
FOR PARTICIPANTS IN 2009-2010
ST. CECILIA RELIGIOUS EDUCATION PROGRAM**

I (WE), THE UNDERSIGNED PARENTS OR GUARDIAN(S) OF THIS/THESE MINORS: (PLEASE LIST FULL NAMES AND BIRTHDATES)

DO HEREBY AUTHORIZE ADULT VOLUNTEERS OF SAINT CECILIA PARISH AS AGENTS FOR THE UNDERSIGNED, TO CONSENT TO ANY MEDICAL OR SURGICAL CARE DEEMED ADVISABLE BY ANY ACCREDITED PHYSICIAN OR SURGEON IN AN APPROVED EMERGENCY CLINIC OR HOSPITAL. I FURTHER RELEASE FROM ANY LIABILITY ST. CECILIA, ANY OF ITS MINISTRIES OR LEADERS IN THE EVENT OF AN ACCIDENT EN ROUTE, DURING AND RETURNING FROM THE P.S.R. CLASSES. THIS AGREEMENT DOES NOT APPLY TO CLAIMS FOR INTENTIONAL MISCONDUCT OR GROSS NEGLIGENCE.

DATE SIGNED: _____

PARENT/LEGAL GUARDIAN (PRINT) _____

PARENT/LEGAL GUARDIAN (SIGN) _____

ADDRESS: _____ ZIP _____

EMERGENCY PHONES:

HOME _____

OTHER _____

THIS IS A: ___WORK # OR ___CELL #

LIST ANY ALLERGIES, INCLUDING MEDICATIONS, FOODS, ETC.

IF PARENT/LEGAL GUARDIAN IS NOT AVAILABLE IN AN EMERGENCY, PLEASE CONTACT:

NAME & RELATIONSHIP _____

PHONE _____

Please return to the Religious Education Office. Thank you!