



ST. PAUL CATHOLIC CHURCH

8720 Florin Rd (Physical Address)

Sacramento, CA 95828

P.O. Box 292280 (Mailing Address)

Sacramento, CA 95829

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June 1, 2020

Dear Parents/Guardians:

Happy Feast Day of the Blessed Virgin Mary, Mother of the Church!

I hope this letter finds you well and safe at home. On behalf of Fr. Joyle Martinez, our Pastor, the Parish Staff and Catechists, I would like to express my heartfelt thanks and appreciation of your collaborative effort for the spiritual well-being and value formation of your child/children. I regret that we have no formal closure of the faith formation program in the classroom setting this catechetical year. However, we are still grateful that most of us managed to do our online classes virtually, group text messages, messenger, phone calls and other means of communication. Thank you for your patience, understanding and support during this difficult time of pandemic crisis. Through the intercession of Blessed Virgin Mary, the Mother of the Church and our Mother, we pray that the global crisis we are experiencing right now will soon come to an end.

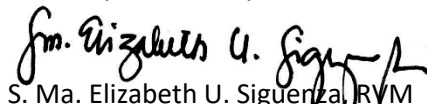
The celebration for the Initiation Sacraments is still to be scheduled in Fall. We will communicate to you as soon as we have set the schedule for you to be able to prepare your child/children for Penance Service. You can also check our website www.stpaul-florin.org for information and updates.

This school year 2020-2021 might be a unique setting for our incoming students. Nevertheless, we welcome all of you to register for the continuing process of our faith formation program. We are obliged to abide to the directives of the State and the Diocese in catechizing our children with precautionary measures. **Although registration will officially start in July 2020, you are welcome to register early.** Please fill out the attached form at your convenience and submit it with your payment to the to the parish office. **If you are paying with a check, please make it to St. Paul Catholic Church.**

- Registration Fee – \$ 95.00 (non-refundable)**
- Confirmation Fee – (Retreat) - \$ 75.00, Fired Up - \$ 35.00**
- Communion Fee – \$ 25.00**

We are also in need of new catechists (main and assistants). We are inviting you to join our CFF ministry. If you are interested, please complete the form below.

Sincerely in Our Lady,


S. Ma. Elizabeth U. Siguerza, RVM
Director of Religious Education

✂ _____ Please cut and return this portion _____ ✂

I am interested in joining the CFF Ministry as a catechist in the coming school year 2020-2021.

Name: _____ (please print)
 Phone: _____ (Home) _____ (Cellphone)
 Email: _____

Please Check:
 New Student Returning Student

ST. PAUL CATHOLIC CHURCH
8720 Florin Road, Sacramento, CA 95828
2020-2021 CATHOLIC FAITH FORMATION REGISTRATION FORM

Date _____ Envelope # _____

Last Name _____ First Name _____ Middle Name _____

Home Address _____ City _____ State _____ Zip Code _____

Gender: Male ___ Female ___ Age _____ Date of Birth _____ Birthplace _____

Baptismal Date _____ Church _____ Address _____

Father's Name _____ Home # _____ Cell # _____ Work # _____ Email _____

Mother's Name _____ Home # _____ Cell # _____ Work # _____ Email _____

Siblings: Name _____ Date of Birth _____ Name _____ Date of Birth _____

Name _____ Date of Birth _____ Name _____ Date of Birth _____

Marital Status: (check) Married: _____ Church: _____ Civil: _____ Widow/Widower: _____ Single Parent: _____ Divorced: _____

Guardian's Name _____ Home # _____ Cell # _____ Work # _____ Email _____

(If Applicable)

School Grade Level _____ School the Child is Enrolled In _____

CFF Grade Level _____ Class Day _____ Class Time _____ Catechist _____

Registration Fees (Non- refundable):

\$ 95.00 Per Student (Registered parishioners) Confirmation Fee (Including Retreat and Fired Up) = **\$110.00**

\$ 110.00 Per Student (Non-registered parishioners who are willing to register) Communion Fee = **\$25.00**

Catechist's Children 50% off

Other Fees:

For CFF Use Only:

Documents on File:

___ Baptismal Certificate Date _____ Church _____ Place _____

___ First Reconciliation Certificate Date _____ Church _____ Place _____

___ First Communion Certificate Date _____ Church _____ Place _____

Registration Fee Paid: Amount _____ Cash _____ Check # _____ Receipt # _____

CFF Registration Staff: Name _____ Date _____

EMERGENCY HEALTH INFORMATION

In the absence of parents:

Second contact will be (Relative, Friend, Neighbor) _____ Phone # _____

Residency Requirement: (Circle One) I am the above child's parent, relative, legal guardian, or foster parent.

Foster Parent License Number: _____

Child's Allergies to Drugs or Food: _____

Medication Currently Taking: _____

Time and Dosage of Medicine: _____

Last Tetanus Shot (Month/Year): _____

Please state any health and/or learning concerns that your child has that is important for the catechist to know: (such as seizures, asthma, allergies, visual or hearing disabilities, attention deficit, hyperactivity disorder (ADHD) difficulty reading or writing, short attention span etc.) _____

Please indicate desired action in the event of an accident or emergency. (Circle #1 or #2)

1. In the event of accident or other emergency: When parent is unavailable, I hereby authorize a representative of St. Paul Church to make such arrangements as he/she considers necessary for my child to receive medical or hospital care, including transportation. Under such circumstances, I further authorize the physician named below to undertake such care and treatment of my child as he/she considers necessary. In the event the physician is not available at that time, I authorize such care treatment to be performed by any licensed physician or surgeon. The undersigned hereby agrees to bear any costs incurred as a result of the foregoing.

_____	_____	_____	_____
Medical Insurance Company	Medical Record	Physician's Name	Physician's Phone

2. I do not choose the above statement and desire the following action instead: _____

_____ Date: _____
 Parent/Guardian Signature