

**Church of the Magdalene
525 Bedford Road
Sleepy Hollow, NY 10591
914-631-0529**

June 2021

Dear Parents,

It is again time for registration for our Religious Education Program. **Please fill out the short-enclosed form and indicate, if necessary, any changes in your contact information.** It will also be necessary for you to fill out the dismissal slip as required by the archdiocese.

The tuition for next year in our Religious Education Program remains the same and is \$250 for the first child and \$75 for each additional child in the family (\$350 for the first child and \$75 for each additional child for non-parishioners). Catechesis of the Good Shepherd, **Level II and III, tuition is \$350 for the first child and \$75 for each additional child** (\$450 if out of parish). **Please enclose your check, made out to The Church of the Magdalene, with your forms in the enclosed envelope by June 30.** If tuition presents a hardship, please let me know.

Religious Education Classroom program (blue form)

Grades 2, 3, 4 and 5 will be on Tuesday from 4:00 to 5:30 PM.

Grade 6 will be on Thursday from 4:00 to 5:30 PM.

Grades 7 and 8 will be on Tuesday from 7 PM to 8:15 PM.

Catechesis of the Good Shepherd (yellow form)

Level I: For all children in kindergarten and first grade

Tuesday or Thursday, 4:00 to 5:30 PM

Level II: For children grades 2 to 4, Thursday, 4:00 to 6:00PM

Level III: For children grades 5 to 8, Thursday 4:00 to 6:00 PM

New Students: (green forms in rear of the church or online)

For all new students in any grade or program from K to 8, even if you have other children in the program

Sincerely,

Dotty Meehan, Director of Religious Education (dotmeehan@aol.com)

Church of the Magdalene
525 Bedford Road
Sleepy Hollow, NY 10591
914-631-0529

**2021/2022 Religious Education Re -Registration (Return by June 30)
For children in grade 2 to 8 (classroom program)**

Parent's Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ e-mail _____

Are you a member of the parish? _____

If no, what parish do you attend? _____

Child's Name: _____ Grade in Sept: _____

Child's Name: _____ Grade in Sept: _____

Child's Name: _____ Grade in Sept: _____

Child's Name: _____ Grade in Sept: _____

Emergency Contact Information:

Special needs of your child/children, health/educational: _____

Tuition:

Parishioners: (Registered in the parish; attend Sunday Mass and use the envelope system)

\$250 for first child, \$75 for each additional child. \$ _____

Non-Parishioners:

\$350 for first child, \$75 for each additional child \$ _____

Make checks payable to The Magdalene

Parents Signature: _____

Date: _____

Church of the Magdalene

525 Bedford Road

Sleepy Hollow, NY 10591

914-631-0529

2021/2022 Catechesis of the Good Shepherd Re-Registration (Return by June 30)

Parent's Name: _____

Address: _____

City, State, Zip: _____

Phone: _____ e-mail _____

Level I Tuesday Program for children in Kindergarten and first grade

Child's Name: _____

Child's Name: _____

Level I Thursday Program for children in Kindergarten and first grade

Child's Name: _____

Child's Name: _____

Level II Thursday Program for children grades 2 to 4

Child's Name: _____

Child's Name: _____

Level III Thursday Program for children grades 5 to 8

Child's Name: _____

Child's Name: _____

Level III Saturday Program for children grades 5 to 8

Child's Name: _____

Child's Name: _____

CGS III Confirmation Cohort (Grades 7 & 8) Tuesday evening sessions, 7:00 to 8:30 PM

Emergency contact information: _____

Special needs of your child, health/educational: _____

(over)

Tuition: Level I

Parishioners: (Registered in the parish; attend Sunday Mass and use the envelope system)

\$250 for first child, \$75 for each additional child \$ _____

Non Parishioners:

\$350 for first child, \$75 for each additional child \$ _____

Tuition: Level II and Level III

Parishioners: (Registered in the parish; attend Sunday Mass and use the envelope system)

\$350 for first child, \$75 for each additional child \$ _____

Non Parishioners:

\$450 for first child, \$75 for each additional child \$ _____

Parents Signature: _____

Date: _____

Church of the Magdalene
525 Bedford Road
Sleepy Hollow, New York 10591
(914) 631-0529

June 2021

Dear Parents,

Religious Education Program

**Registration Forms for
New Students enrolling for first
time in any of our classes,**

Kindergarten to 8th grade

The following is a complete set of registration forms for our Religious Education Program. **If your child is new to our program and is in kindergarten, first grade or a higher grade**, please complete these forms and return them to the Religious Education Office, along with your child's **baptismal certificate** and tuition check made out to the Church of the Magdalene, to the address above as soon as possible. **All of our kindergarten and first graders will be in Level One of our Catechesis of the Good Shepherd** and will have a choice in second grade to enter Level Two of our Catechesis of the Good Shepherd program or Grade 2 of our Religious Education Program.

We have two programs that you can consider for your child **after 1st grade**:

Our Catechesis of the Good Shepherd Program will have 4 sections this year

Level One, Tuesday, 4:00 to 5:30 PM for all **kindergarten and 1st grade**

Level One, Thursday from 4:00 to 5:30 PM for all **kindergarten and 1st grade**

Level Two, Thursday from 4:00 to 6:00 PM for children in grades 2 to 4

Level Three, Thursday from 4:00 to 6:00 PM for children in grades 5 to 8

Our Classroom based Religious Education Program for grades 2 to 8

Grades 2 to 5, Tuesdays from 4:00 to 5:30 PM

Grade 6, Thursday, from 4:00 to 5:30 PM

Grades 7, and 8, Tuesdays from 7:00 to 8:15 PM

Tuition for grades Kindergarten to 8th is \$250 for the first child and \$75 for each additional child.

If you are not a parishioner, tuition is \$350 for the first child and \$75 for each additional child.

For our Level Two and Three of the Catechesis of the Good Shepherd, tuition is \$350 for the first child and \$75 for each additional child or \$450 for out of parish.

Please fill out the dismissal authorization form listing all your children regardless of grade level and program. If you have questions or concerns, please call me at 914 631-0529 or e-mail at dotmeehan@aol.com.

Dotty Meehan, Director of Religious Education (dotmeehan@aol.com)

Church of the Magdalene

525 Bedford Road, Sleepy Hollow, NY 10591 914-631-0529

2021/2022 New Student Religious Education Registration

Child's Name: _____

Address: _____

City, State, Zip: _____

Phone(s): _____ Cell phone _____

e-mail _____

Are you a member of the Magdalene? Yes No No, but I would like to join

If no, what parish do you attend? _____

Please check the class your child will attend

- | | |
|--|---|
| CATECHESIS OF THE GOOD SHEPHERD | CLASSROOM PROGRAM |
| <input type="checkbox"/> CGS I (grade K & 1), Tuesday, 4 – 5:30 PM | <input type="checkbox"/> Grade 2, Tuesday, 4 – 5:30 PM |
| <input type="checkbox"/> CGS I (grade K & 1), Thursday, 4 – 5:30 PM | <input type="checkbox"/> Grade 3, Tuesday, 4 – 5:30 PM |
| <input type="checkbox"/> CGS II (grade 2 to 4) Thursday, 4 – 6 PM | <input type="checkbox"/> Grade 4, Tuesday, 4 – 5:30 PM |
| <input type="checkbox"/> CGS III (grade 5 to 8) Thursday, 4 – 6 PM | <input type="checkbox"/> Grade 5, Tuesday, 4 – 5:30 PM |
| | <input type="checkbox"/> Grade 6, Thursday, 4 – 5:30 PM |
| | <input type="checkbox"/> Grade 7, Tuesday, 7 – 8:15 PM |
| | <input type="checkbox"/> Grade 8, Tuesday, 7 – 8:15 PM |

TUITION

Classroom Program & CGS I: Parishioners: \$250 for the first child, \$75 for each additional child

Out of parish: \$350 for the first child, \$75 for each additional child

CGS II & III: Parishioners: \$350 for the first child, \$75 for each additional child

Out of parish: \$450 for the first child, \$75 for each additional child

Parishioners must be registered in the parish, attend Sunday Mass, and use the envelope system.

Parent's Signature: _____ Date: _____

Church of the Magdalene
525 Bedford Road, Pocantico Hills, NY 10591

Religious Education Registration Grade K-8

Student Information Record

Child's Name: _____

Street Address: _____

City, State, Zip: _____

Phone: _____ Email: _____

Cell Phone: _____

Date of birth: _____ Age of September 1, 2021 _____

Siblings who are enrolled in the program

Name: _____ Grade: _____

Name: _____ Grade: _____

Name: _____ Grade: _____

Father's full name: _____

Business address: _____

Business Phone: _____ Religion: _____

Cell Phone: _____ Occupation: _____

Mother's First/Maiden

Name: _____

Business Address: _____

Business Phone: _____ Religion: _____

Cell Phone: _____ Occupation: _____

Does your child have any special medical/emotional/learning needs? (will be held in the strictest confidence)

YES

NO

If yes, please describe:

PLEASE FILL OUT REVERSE SIDE OF THIS FORM

EMERGENCY CONTACTS (please provide two)

Name: _____ Relationship _____

Address: _____

Phone Number(s): _____ Cell Phone _____

Name: _____ Relationship _____

Address: _____

Phone Number(s): _____ cell Phone _____

Signature of Parent or Guardian

Date



SACRAMENTS	Date	Church	City, State
Baptism			
First Holy Communion			
Confirmation			

