Dear Parents,

Thank you for your faithfulness to the promise you made to God, His Church and your children to teach them the practice of the Catholic faith which instills in them love of God and of those around you. It is an important obligation for your part, to provide for your child’s faith education while they remain in your care; you are and remain the primary educator of your children and as such it is part of the responsibilities God gave you when He gave you the gift of your child. Supporting you in your vocation as parent is a mission, All Souls takes very seriously. We hope our programming is helpful to you in this regard and should you have any questions, feel free to contact me at any time.

2019-2020 RE Schedule – Sunday Morning

Pre-K 10:30 – 11:45 am  3 & 4 Year olds (potty trained only)
Kindergarten 10:30 – 11:45 am
Grade 1 10:30 – 11:45 am  Begin 1st Reconciliation Preparation
Grade 2 10:30 – 11:45 am  1st Reconciliation Preparation
Grade 3 10:30 – 11:45 am  Confirmation & 1st Holy Communion Prep*
Grade 4 10:30 – 11:45 am
Grade 5 10:30 – 11:45 am

For Grades 6 – 12  These ages are under the care of Youth Ministry in 2 groups (Middle School age and High School age) that meet separately. Our Youth Minister, Tyler Eberle, has ongoing, age suitable catechesis specific to those ages to help them grow in their faith and face the challenges presented by the world they encounter daily.

Adults  10:30 – 11:45 am  Every Sunday beginning September 29th and again January 26th, for 5 consecutive weeks, classes will be offered in a series of 5 to provide parents with a deeper appreciation of the Sacraments. The classes are; A.) Liturgy and Sacraments; B.) Baptism; C.) Reconciliation; D.) Confirmation; E.) Eucharist. These classes are intended to refresh the Parents knowledge base to help us in preparing your child for the Sacraments. Parents need to attend 1 set of these 5. We will also address Sacramental Prep questions as needed.

*Confirmation and 1st Holy Communion Mass TBD.

Tuition Details

First Child - $80.00  Second Child - $70.00  Third Child - $60.00.
Sacramental Prep Fee is $40.00 per child. This will be for grades 2 and 3.

Ex. 1  Family with 2 children  1st child = 80.00 + 2nd child = 70.00  Total is 80 + 70 = $150.00.
Ex. 2  Family with 4 children  1st child = 80.00 + 2nd child = 70.00 + 3rd child = 60.00 + 4th child = 60.00
      Total is 80 + 70 + 60 + 60 = $270.00
Ex. 3  Family in ex 2 above, 2 children are being prepared for sacraments, an additional 40.00 per child is added.  Total is 80 + 70 + 60 + 60 + 40 + 40 = $350.00

Please continue to the next page for further information.
ATTENTION PARENTS

ATTENTION – Mass Attendance is one major aspect of living the Gospel as preached by Jesus and the Church He founded. Setting the example of attending Mass joyfully helps the parent(s) pass on the faith to their children as they show by their actions that this faith is important to them.

APPEAL – Your help is always welcome. If you or someone you know would like to help as a Catechist or Catechist Aide, please contact Roger Goelitz at the Parish Office.

SAFE ENVIRONMENT TRAINING – Should you discern a calling to help either as a Catechist or even the desire to volunteer for any reason, we ask that you consider attending a Safe Environment Training (SET). This is a requirement of the Archdiocese of Denver. Once that training is completed, your ability to volunteer on a regular basis or at a moment’s notice is acceptable. Please make this a consideration for your ability to further participate in your child’s very important education in the faith that you so generously are passing on. We intend to offer 2 different class times prior to the start of RE in the Fall; see below.

SET will entail attending the class (the Certificate is then good for 5 years; and can be renewed online) and then allowing All Souls to conduct a background check.

Class Times: TBD

PLEASE RESPOND WITH YOUR INTEREST IN ATTENDING THIS CLASS TO HELP US PREPARE FOR THE PROPER SPACE AND TIMES NEEDED.
Child’s Name_________________________________________Male____Female______

Last               First                  Middle

Date of Birth_________ School attending______________________________________________

Has your child been baptized?    Yes ____   No ____

Parent/Legal Guardian________________________________________________________________________

Home Address ____________________________________________________________

Last Mother Father

City Zip

Primary Phone____________________________ Primary E-mail_________________________

Is your family registered at All Souls Catholic Church? Yes_____ No_____  
If “no”, you will need a letter from your pastor giving you permission to attend RE classes here.

Check “one” of the boxes below and initial at the end of the statement that applies.

☐ I hereby grant permission for the above child to be photographed or videotaped and give my permission for his/her picture to be published for the purpose of promoting programs at All Souls Catholic Community and on our web site.  (Parent Initial) ______

☐ I hereby decline to grant permission for my child to be photographed or videotaped.  I have instructed my child to decline being photographed or videotaped at all times and have instructed my child to notify directors, coordinators, catechists, and other volunteers that he/she may not be photographed or videotaped under any circumstances.  (Parent Initial) ______

*I hereby acknowledge that I am the parent or legal guardian of the above child and give him/her my permission to participate in activities planned at the All Souls’ Campus and locations within the local area during the scheduled program times and dates.  I understand that reasonable precaution will be taken to safeguard the health and safety of the participant and that the designated emergency contact person will be notified as soon as possible in case of emergency.  In the event of any sickness or accident I will not hold All Souls, the Archdiocese of Denver, any volunteer, chaperone, or driver responsible.  I authorize and consent that emergency treatment be rendered under the general or specific supervision and on the advice of any physician, dentist, or surgeon licensed to practice in the State of Colorado.  The undersigned understands and agrees that any medical, dental, or hospital expenses incurred shall be at his/her own expense.  The undersigned understands every effort will be made to notify the emergency contact in the event that treatment is necessary.

Signature of Parent/Legal Guardian___________________________________________________________  date________________________

Emergency contact:________________________________________________________________________

Last First Relationship to participant Phone Email

FOR OFFICE USE ONLY (RE Fee Schedule)

1st child $80_________2nd child $70_________3rd child $60_________4th child $60_________

Date paid___________ cash_____ check #_______ amount________________

Roger Goelitz, Director of Religious Education, (303) 789-0007 x2709, 4950 S. Logan St., Englewood, CO 80113