



**PARISH OF SAINT ANNE**  
35 Dartmouth Street, Garden City, New York 11530

**OFFICE OF FAITH FORMATION**  
Tel: 516-488-1032 Fax: 516-352-1360

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May 3, 2011

Dear Parent(s),

We would like to welcome you and your family to the Church of Saint Anne and in particular to our faith formation program. Classes will begin in September, 2011.

We are now ready to begin registration for the fall classes. Please complete the attached form for your family registration. Since we are looking to cut down on mailing costs we are requiring an email address for every family. Please submit a copy of the Baptismal certificate for each child that you are registering. For any child entering grades 2-7 a transfer letter from your previous program must accompany your registration.

Classes (grades 1-6) are held at St. Anne's school on Sunday, Tuesday or Wednesday. Grades 7-8 will be held Sunday morning or Wednesday evening bi-weekly. Please be sure to indicate a 1<sup>st</sup> and 2<sup>nd</sup> choice on the registration form. Thank you for your prompt return. Tuition *must* accompany registration forms. Registrations will not be processed without payment unless a special arrangement has been made. Special payment arrangements are available for any family in need. Choice preferences will be given first come first served. We cannot guarantee first choices. ***Please do not*** request a specific teacher or placement of your child with friends. A ***late fee of \$25.00*** will be due if the registration is returned ***after June 8, 2011***. Since the Faith Formation office is closed for July and August, we would like to have all registrations processed prior to the summer.

Anyone who is interested in becoming a catechist should call Lyn Beck to arrange a meeting. All volunteers will be required to complete the parish and diocesan volunteer forms and must have attended the Diocesan Virtus Training for the Protection of Children. ***All*** catechists in the program will be given a ***50% discount*** on their family rate.

We look forward to welcoming your child (ren) into our Faith Formation program. Notification about class assignment will be sent home in late summer.

Lyn Beck  
Director Faith Formation  
[lbeck@stannesgc.org](mailto:lbeck@stannesgc.org)

Tricia Brodersen  
Secretary Faith Formation  
[tricia@stannesgc.org](mailto:tricia@stannesgc.org)



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**Saint Anne's Faith Formation  
 New Family Registration Form 2011-2012**

**All Fields MUST be filled in:**

Parent(s) Name: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_ Home # \_\_\_\_\_  
 \_\_\_\_\_ Cell # \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Telephone # \_\_\_\_\_

Student's First & Last Name	Date Of Birth	IEP PLEASE CHECK HERE	M	School Child Attends as of September	Grade in public School as of September	<u>Please list two Choices for day</u> Sunday 8:30am- 10:00am – Grades 7-8 *See Note Sunday 11:00am – 12:10pm – Gr. 1-6 Tuesday 4:00pm – 5:10pm – Gr. 1-6 Wednesday 4:00pm – 5:10pm Gr. 1-6 Wednesday 7:00pm –8:30pm Gr. 7-8 *See Note One on One Program – Sunday 9:15am – 10am 1 <sup>ST</sup> Choice                      2 <sup>nd</sup> Choice
1.						
2.						
3.						
4.						
5.						

**\*\* Please Note:** All 7<sup>th</sup> and 8<sup>th</sup> grade classes are 1 and ½ hours long and follow a specific schedule distinct from the weekly schedule. 8<sup>th</sup> grade students will also attend a series of mandatory meetings in preparation for Confirmation.

**Please return a copy of your child/ren's Baptismal certificate. For any grade other than first you must supply transfer info from previous program in order to register. We will not place students in a class without it.**

***If your child has an EIP please indicate above.***

**Please note on the back any special education needs for your children. This will be kept confidential. This will help us place your child appropriately.**

**Registration Fee:** \$100.00 one child / \$180.00 two children; three or more \$260. Please make checks payable to St. Anne's Parish. **Registrations received after June 8<sup>th</sup> require a late fee of \$25.**

**For office use only:** Payment Enclosed: Y \_\_\_ N \_\_\_ Amount Paid: \_\_\_\_\_ Cash: \_\_\_\_\_ Check# \_\_\_\_\_ Date Paid \_\_\_\_\_