

# *Our Lady of Mount Carmel*

*A Roman Catholic Community in Boonton, New Jersey*

## **RELIGIOUS EDUCATION**

No matter what the current environment places in front of us, we are committed to assisting you in leading your children to encounter the Lord and deepen their relationship with Him in a very real way. This academic year, we hope to do so by employing a comprehensive Family Catechesis approach to Religious Education.

“Family-centered catechetical programs are opportunities for parents to catechize their children directly, for spouses to catechize each other and for children to catechize one another and their parents” (NDC #61.2).

**We seek to do so by offering our families the choice of attending regular sessions at our parish and/or committing to employ these same practices at home.**

**Either way, our Faith Formation Program will provide all families with a program that consists of:**

- bringing families together to share & deepen their Catholic faith
- establishing ongoing Family Prayer in the home centered on Scripture and Tradition.
- integrating the family into our beloved OLMC parish community
- an exciting once a month Family Movie Night
- a fun monthly Family project
- encouraging discussion Questions for the entire Family

The cost of the program is \$75 for the first child.

\$120 for two children.

\$150 maximum for all children in your family.

- Please register by September 1<sup>st</sup>, 2021

# OLMC Religious Education 2021-2022

**In Class Meetings**  
Classes take place on Sundays from  
10:00am-10:45am.

**Home Meetings**  
Lessons to be completed at home and a  
scheduled meeting with the DRE.

Family Name: \_\_\_\_\_

Parent Contact: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Emergency #: \_\_\_\_\_

Child 1:	Grade:
Child 2:	Grade:
Child 3:	Grade:
Child 4:	Grade:
Child 5:	Grade:

**(PLEASE FILL OUT THIS PAGE FOR EACH OF YOUR CHILDREN)**

PARISH: Our Lady of Mount Carmel Church Religion Permanent Record Card

Student: \_\_\_\_\_ Sex: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
\_\_\_\_\_

Father: \_\_\_\_\_ Last Name: \_\_\_\_\_

Mother: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Family Email: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Important Medical Information:

**Copy of  
Certificate on  
file at OLMC?  
(circle one)**

Baptism Date: \_\_\_\_\_ Parish: \_\_\_\_\_ Yes / No

Reconciliation Date: \_\_\_\_\_ Parish: \_\_\_\_\_ Yes / No

First Eucharist: \_\_\_\_\_ Parish: \_\_\_\_\_ Yes / No

Confirmation: \_\_\_\_\_ Parish: \_\_\_\_\_ Yes / No

Additional Comments:

- **If we do not have a copy of your child/children's sacramental records, please attach them with these forms. Thank you!**