

## 2010 IPRF FAMILY SURVEY .

Inter-Parish Religious Formation Office (IPRF) provides a quality program of faith formation for your children within the guidelines of the National Directory for Catechesis, Diocese of Green Bay guidelines, and the advice of the Pastors and the IPRF Board.

Below are a some statements and questions regarding the Religious Education program. Decide to what degree you would rate the following statements.

**3 (above average) 2 (average) 1 (below average) ? (insufficient info to answer)**

1. How well is the IPRF program serving your child's needs in the classroom? 3 2 1 ?  
Comments:

2. Please rate the following family nights / experiences 3 2 1 ?  
Opening night with Drew Mulloy about stewardship and discipleship  
Comments:

Christmas Family night / Pageant 3 2 1 ?  
Comments

Other family experiences (grade level family nights, Sacramental preparation, Prayer services) 3 2 1  
Please specify event \_\_\_\_\_  
Comments

3. Children's stewardship envelopes were promoted to encourage youth to write the acts of kindness and service that they had done recently, and bring them to Sunday Mass, in the regular or children's collection.  
How often were you able to participate in this?

How can we make envelopes easier for children and families to use?

4. What was the highlight of the year for each of your children?  
Comments: (Please state which grade)

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

Additional comments, or more comments on any of the above, please use the reverse of this sheet, or additional sheets. Thank you for taking the time to complete this form! IPRF Staff

\*\*\*\*\*PLEASE RETURN this SURVEY with your IPRF REGISTRATION FORM on April 21<sup>st</sup> \*\*\*\*\*

# IPRF REGISTRATION FORM FOR 2010-2011 CLASSES

Inter-Parish Religious Formation

404 W. Lawrence St., Appleton, WI. 54911

Phone: 738-7413 Fax: 734-0227 Email: [iprf@inter-parish.org](mailto:iprf@inter-parish.org) Website: [www.inter-parish.org](http://www.inter-parish.org)

Today's Date: \_\_\_\_\_

## PARENT INFORMATION:

Mother/Stepmother/or/Guardian

(circle one)

Father/Stepfather/or/Guardian

(circle one)

First/Last Name: Ms./Mrs. \_\_\_\_\_

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

City, Zip: \_\_\_\_\_

Home Ph#:/Cell ph# \_\_\_\_\_

Place of Business: \_\_\_\_\_

Work ph#: \_\_\_\_\_

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

Marital Status: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like your correspondence to go to (M/M, Ms, Mr.,) \_\_\_\_\_

Registered Member at **St. Joseph** or **St. Mary** (circle which church) explain if no: \_\_\_\_\_

## **WHO SHOULD WE CONTACT IF PARENTS CAN NOT BE REACHED IN AN EMERGENCY?**

Name: \_\_\_\_\_ Phone (home) \_\_\_\_\_ cell # \_\_\_\_\_

## STUDENT INFORMATION

LAST NAME OF CHILDREN: \_\_\_\_\_

- Please indicate below which **SACRAMENTS** each child has received (**Bapt.** is **Baptism**, **Euch.** is **First Eucharist**, **Reconcil.** is **Reconciliation**, and **Conf.** is **Confirmation**)
- Enter each child's **grade** and **name of school** that they will attend in the **FALL of 2010**
- Enter desired **class time**

<u>Child's Name</u>	<u>Gender</u>	<u>Birthdate</u>	<u>Grade</u> (School year 2010-2011)	<u>School</u>	<u>4:30/6:30</u>	<u>Bapt.</u>	<u>Euch.</u>	<u>Reconcil.</u>	<u>Conf.</u>
_____	_____	_____	_____	_____	_____	Y/N	Y/N	Y/N	Y/N
_____	_____	_____	_____	_____	_____	Y/N	Y/N	Y/N	Y/N
_____	_____	_____	_____	_____	_____	Y/N	Y/N	Y/N	Y/N
_____	_____	_____	_____	_____	_____	Y/N	Y/N	Y/N	Y/N
_____	_____	_____	_____	_____	_____	Y/N	Y/N	Y/N	Y/N

**DO ANY OF YOUR CHILDREN HAVE SPECIAL NEEDS?** If yes please list them below:

Name of Child \_\_\_\_\_ Special Needs, Allergies, Disabilities \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2010-2011

# Inter-Parish Religious Formation Stewardship Opportunities

The Inter-Parish Religious Formation (IPRF) program of St. Mary/St. Joseph Parishes depends on volunteers.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Parish: \_\_\_\_\_

IF YOU HAVE SIGNED UP AT YOUR PARISH STEWARDSHIP SUNDAY, PLEASE DO IT AGAIN AT REGISTRATION FOR OUR RECORDS. PLEASE CHECK AREAS OF INTEREST.

## \_\_\_\_\_ Catechist

Job Description: Prepare and present a weekly lesson to young people. Share faith under the constant guidance, support and training of our coordinators. Time commitment averages 3.5 hours per week, which includes preparation, Wednesdays, 4:30-5:40 OR 6:30-7:40 p.m. Gr. 11 Confirmation Catechist 4 Sunday Night Sessions. Feb.-May (Training required)

Grade Preference:

( ) K-2 ( ) 3-4 ( ) 5-8 ( ) 9-11  
( ) Confirmation

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Catechist-Substitute

Job Description: Be available to present a prepared lesson to young people when a regular catechist is unavailable. Time commitment varies. (Training required)

Grade Preference:

( ) K-2 ( ) 3-4 ( ) 5-8 ( ) 9-11

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Catechist Aide- Special Needs

Job Description: Be available as a faith filled individual with an interest or personal experience in special needs area to assist an individual child in the classroom weekly. (Training required)

Grade Preference: ( ) K-5 ( ) 6-8

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Catechist Aide

Job Description: Assist catechists with the students during class time-little to no preparation necessary. Time commitment Wednesdays 4:30-5:40 OR 6:30-7:40 p.m. (Training required)

Grade Preference: ( ) K-4 ( ) 5-8

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ First Eucharist Mentor

Job Description: Meets with a child who is preparing for his/her First Eucharist in your parish.

## \_\_\_\_\_ Prayer Helper

Job Description: Be available twice a month sit in hallway or classrooms and work with primary children on learning their prayers. (Training required)

( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Hall Monitor \_\_\_\_\_ Office \_\_\_\_\_ Babysitting

Job Description: Assist Coordinators during Wednesday evenings with support services. (Training required)

Location Preference:

( ) St. Joseph ( ) Catholic Central

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Parking Lot Monitor

Job Description: Insures safety of children, directs traffic through designated entrances/exits of parking lot of both parishes. (Training required)

Location Preference:

( ) St. Joseph ( ) Catholic Central

Time Preference: ( ) 4:30 ( ) 6:30

## \_\_\_\_\_ Youth Events Chaperone

Job Description: Supervise and/or help with food.

## \_\_\_\_\_ Wednesday "Youth Hang Out" Chaperone

Job Description: Set out food/drinks and supervise high school youth in between class sessions from 5:30-6:30 in Holly Hall. 1-3x per month.

## \_\_\_\_\_ Youth Advisory Team

Job Description: Meet every other month with a team of both adults and youth to create goals, share ideas, and plan events.

## \_\_\_\_\_ Prayer Team

Job Description: Specifically pray for the youth, Youth Ministry Coordinator, and youth advisory team. You will receive a list of our events, as well as special intentions as they arise.

## \_\_\_\_\_ Service Team

Job Description: Join with youth to do service projects in the community or on service weeks (local or national camps).

## \_\_\_\_\_ Inter-Parish Religious Formation Board

Job Description: establishes policies for the IPRF Program.

## \_\_\_\_\_ "At Home" Help

\_\_\_\_\_ Baking for events

\_\_\_\_\_ Artwork for specific projects

\_\_\_\_\_ instrumental \_\_\_\_\_ vocal \_\_\_\_\_ accompaniment

\_\_\_\_\_ other talents list below:

# Payment Plan Form

Date Registering \_\_\_\_\_

Tuition charges for 2010-2011:

- \$95 for one child
- \$180 for two children
- \$230 for 3 or more children
- \$250 for each child if family is not a member of St. Mary or St. Joseph parishes
- \$30 per family registration fee is required today to register for next year. This will be deducted from your total tuition due and is non-refundable.

Full Name of the Person Responsible for the bill \_\_\_\_\_

Full Name(s) of Child(ren) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total Tuition Due for 2010-2011 \_\_\_\_\_

**\*Please choose one of the following payment plans.**

Statements will be sent prior to the due date that you have chosen.

- \_\_\_\_\_ Paid in Full  
\_\_\_\_\_ Plan A (Total tuition due by 9/15/2010)  
\_\_\_\_\_ Plan B (50% by 9/15/2010 and 50% by 11/16/2010)

**\*If no payment plan is chosen, you will be billed according to Payment Plan B.**

For Office Use Only:

Date: \_\_\_\_\_ Check # \_\_\_\_\_ Amount \_\_\_\_\_ Initials \_\_\_\_\_