

ST. PAUL'S FAITH FORMATION

Kathy Sledziona, D.R.E.
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Rome, NY 13440

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Dear Parents:

In order for your child to attend Release-time classes at St. Paul's and receive busing to the Rome City Elementary Schools, it is necessary for you to complete a 2-part form for **EACH** child who will attend classes on Wednesday mornings from 8:00 - 9:00 a.m. Cut and send the **SCHOOL COPY** directly to your child's school and return the **CHURCH COPY** to St. Paul's with your registration form. Please return this form no later than **September 10**. Please sign both portions and provide all information requested. If you have any questions regarding individual parish programs, you may contact me at the above address or phone.

Kathy Sledziona

SCHOOL COPY (Send this part to your child's school)
(Please print)

School Name: _____ Grade: _____

Student Name: _____ Phone: _____

Student Address: _____

My child will attend religious education classes on Wednesday mornings at ST. PAUL'S CHURCH, 1807 Bedford St, Rome, NY

In keeping with Section 625-B 2 of the Education Law of 1940 and the subsequent rules established by the Commissioner of Education under date of 7/1/40, I hereby make formal request for the release of my child during regular school time for religious education.

Parent's Signature: _____ Date: _____

Emergency Name: _____ Phone: _____
Contact Person and/or Work Phone

CHURCH COPY (Return this part to St. Paul's)
(Please print)

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Student Name: _____ Phone: _____

Student Address: _____

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