

2022 Summer Program (SUPR) Information

What is involved with the Summer Program? The Summer Program runs 9 days in June or July focusing on Faith Formation. During the regular school year, your family is expected to attend 1 Intergenerational Faith class a month for 6 months.

What is Intergenerational Faith? Intergenerational Faith is sessions the Summer Faith Formation families come to during the regular school year to continue their faith formation beyond the 9 days of Summer Faith Formation. Sessions are held from October thru March. The same lesson is taught at each session for the month. Your family comes to one lesson a month. Kids need to come with an adult. Adults can be parents, grandparents or godparents.

When and where is SUPR22 this year? SUPR22 Session 1 runs from June 6th - June 16th at Seton Catholic in Peosta. The 2nd opportunity runs from July 11th - July 21st at Seton Catholic in FARLEY. They both will run from 8am – 12 noon. We are asking if you have no preference as to which session your kids attend, please have them come to the July session. Since we have some families that can only come in June, we are looking to balance the classes as best we can.

Can my family have kids at each session? Yes, your family can have kids at either session or different kids at each.

Will the same things be taught in each session? The curriculum will be the same. The teachers may or may not be the same.

What are the fees for SUPR22 this year? The SUPR22 fees for both Sessions 1 and 2 are the same: 1st child=\$130, 2 children=\$260, 3 children=\$370, 4 children or more = \$370. Outside the Pastorate fee =\$150. Registrations are due June 1st.

Do I get the family discount if I have kids in both Sessions? Yes.

How early or late can my kids be there? Jim, Mindi or some of the teachers will be at school by 7:30 am. We do offer after school daycare until 5:30 PM for \$12 per child per day during the time frame of the Program. If work forces a longer day, let us know, Jim's cell number is 563-451-2400, we will work something out.

How do I reach the school if my child is sick or if something changes in my day and I will be late picking them up, etc.? Please call Jim on his cell, (563)451-2400. He will let the catechist know. If your child is going to be absent, we need you to send an email to Jim or Mindi, (m.mcdermott@dbqarch.org). This is necessary for the safety of your child. Even if you mentioned it to us or put it on the registration forms, Please, remind us again.

What does their day look like? We rotate the time into 3 hours of teaching blocks, music, P.E, snacks, and recess.

If my student would miss classes in one session can they make up those days in the other session? No, due to different teachers and class dynamics, this is not possible.

My child has food allergies, what do I do? Please let us know! Please send a snack with your child as we will attempt to avoid peanuts/tree nuts but the safest is when the student brings their own.

Do they really have homework? Yes, the kids will usually have a Bible exercise to do which take 5 – 10 minutes. High Schoolers that miss a day will definitely have to make up work missed.

Do they have Mass? Yes, we will have Mass 1 day a week at 8:30am. The Masses are open to parishioners so feel free to attend and/or send Grandma/Grandpa or Godparent(s).

Will they have Reconciliation? Yes, we will have reconciliation for the kids after one of the Masses.

Tuition

In- Pastorate Students

1st Student - \$130 2 Students - \$260 3 or more Students - \$370

PLEASE MAKE CHECKS PAYABLE TO: St Elizabeth Pastorate Faith Formation

Payments can be mailed along with registration form and Consent/Liability Waiver to St Elizabeth Pastorate Faith Formation, P.O. Box 286, Epworth, IA 52045. Payments can be made on 1st day of class if registration forms are turned in early. Pastorate Families: full payment is preferred but not necessary. If financial hardship is a concern, please contact the office.

Please DO NOT put the checks into the collection baskets at Mass as they will get mixed in with the Sunday collection.

On –Line Payment: On-line payments can be made by going to St Elizabeth Pastorate’s website, stelizabethpastorate.com, click on “Forms” at the bottom of the first page, click on “on-line payment”

Outside the Pastorate Students Tuition is \$150 per Student

Families need to have permission from their home parish’s pastor prior to registration.

Payment is due in full at the time of registration.

I, the undersigned, understand and accept my financial obligations to St. Elizabeth Pastorate and to the Faith Formation Program.

Parent/Guardian _____ Date _____

CRE/Assistant _____ Date _____

Amt. of Fee Pd. _____ Cash _____ Check# _____ On- Line _____ Date Received _____

Please fill out 1 per registered student

Archdiocese of Dubuque
2022-2023 Annual Parental/Guardian Consent Form and Liability Waiver
Valid date signed through 8-31-23

This Consent Form and Liability Waiver is required for and serves both on-site programs and offsite/field trip events/activities for the stated program year. This form needs to be completed annually for each student. To obtain the needed permission, contact, emergency, and medical information you are requested to supply the needed information. As the specifics of each off-site/field trip event are known you will be required to complete an Off-site/Field Trip Permission Form outlining the specifics of each activity. Please complete all sections.

Section 1 - Contact Information

Student/Participant's Name: _____

Birthdate: _____ Gender: Female ____ Male ____

Parent/Guardian's Name: _____

Home Address: _____

Home/Cell Phone: _____ Business/Cell Phone: _____

Section 2 - Off-site/Field Trip Consent Form and Liability Waiver

I, _____, (Parent or Guardian's Name) grant permission for my child, _____ (Name of Child) to participate in school/parish events this year that may require transportation to a location away from the school/parish site. The activities will take place under the guidance and direction of school/parish employees and/or volunteers of St Elizabeth Pastorate Faith Formation. As parent and/or legal guardian, I remain legally responsible for any personal actions taken by the above-named minor ("Participant"). I agree on behalf of myself, my child named herein, or our heirs, successors, and assigns, to hold harmless and defend, its officers, directors of St. Elizabeth Pastorate Faith Formation and agents, and the Archdiocese of Dubuque, chaperons, or representatives associated with the events, arising from or in connection with my child attending the events or in connection with any illness or injury or cost of medical treatment in connection therewith, and I agree to compensate the parish, its officers, directors and agents, and the Archdiocese of Dubuque, chaperons, or representatives associated with the events for reasonable attorney's fees and expenses which they may incur in any action I/we may bring against them as a result of such injury or damage, unless such claim arises from the negligence of the parish/school or the Archdiocese of Dubuque.

Signature: _____ Date: _____

Section 3 - Specific Medical Matters: I hereby warrant that to the best of my knowledge, my child is in good health, and I assume all responsibility for the health of my child.

Item A - Emergency Medical Treatment: In the event of an emergency, I hereby give permission to transport my child to a hospital for emergency medical or surgical treatment. I wish to be advised prior to any further treatment by the hospital or doctor. In the event of an emergency, if you are unable to reach me at the above numbers, contact:

Name & Relationship: _____ Phone: _____

Family Doctor: _____ Phone: _____

Family Health Plan Carrier: _____ Policy #: _____

Item B - Other Medical Treatment:

In the event it comes to the attention of the parish/school, its officers, directors and agents, and the Archdiocese of Dubuque, chaperons, or representatives associated with the activity that my child becomes ill with symptoms such as vomiting, sore throat, fever, diarrhea, I want to be notified.

Yes

No

If Yes, please call: _____

On-site Nonprescription Medication Permission - I hereby grant permission for nonprescription medication (such as ibuprofen, Tylenol, throat lozenges, etc.) to be given to my child in the event a condition arises after my child is already in attendance at the on-site program.

Yes

No

Item C - Specific Medical Information: The parish/school will take reasonable care to see that the following information will be held in confidence. Check/explain all that are applicable to this student/participant.

Allergic reactions (medications, foods, plants, insects, etc.): _____

Utilizes asthma or airway constricting prescription medication (see item 9.2 below) _____

Has a medically prescribed diet? _____

Any physical limitations? _____

You should be aware of these special medical conditions of my child: _____

Signature: _____ Date: _____

THIS FORM REPLACES PREVIOUS VERSIONS AS OF DATE SIGNED

Administration of Medication - Archdiocesan Catholic School Board Policy 5141, items 9-10. (For Catholic School programs only)

9. Dispensing of prescription medication

1.For Catholic schools - Dispensing of prescription medication will be administered by a nurse or designated party with training and with the written consent of parent(s)/guardian(s). Prescription medication must be provided to the school in the original labeled container containing the physician’s name, name of the medication, and dosage/frequency to be given. A record of each dose of medication administered will be documented in the pupil’s health record.

2.Students utilizing asthma or airway constricting prescription medication are allowed to administer their own dosage provided a completed consent form is on file in the school/program office. Such forms must be filed annually.

3.Contraceptives will not be dispensed. Iowa Code §280.16

10.Dispensing of nonprescription medication may occur, provided the parent/guardian have signed and dated an authorization identifying medication, dosage, and time interval to be administered. Nonprescription medications can be provided on off-site field trips if the parent/guardian signs a nonprescription medication authorization for each off-site field trip.

VOLUNTEER OPPORTUNITIES

We provide a morning snack but need parent volunteers to help set them up, serve them and clean up. Start time would be 9:40 ending time would be 11:30.

ALSO, the kids can use some one-to-one help learning their prayers. This would involve sitting down with each child and reading their grade required prayers with them. This is flexible it can happen any time before or after snack time.

Name _____

Please indicate any day(s) and where you are willing to help.

Session 1 Seton Catholic, Peosta

Mon., 6/6	Tues., 6/7	Wed., 6/8	Thurs., 6/9	Fri., 6/10
__Snack	__Snack	__Snack	__Snack	__Snack
__Prayers	__Prayers	__Prayers	__Prayers	__Prayers

Mon., 6/13	Tues., 6/14	Wed., 6/15	Thurs., 6/16	
__Snack	__Snack	__Snack	__Snack	
__Prayers	__Prayers	__Prayers	__Prayers	

Session 2 Seton Catholic, Farley

Mon., 7/11	Tues., 7/12	Wed., 7/13	Thurs., 7/14	Fri., 7/15
__Snack	__Snack	__Snack	__Snack	__Snack
__Prayers	__Prayers	__Prayers	__Prayers	__Prayers

Mon., 7/18	Tues., 7/19	Wed., 7/20	Thurs., 7/21	
__Snack	__Snack	__Snack	__Snack	
__Prayers	__Prayers	__Prayers	__Prayers	