



# CHOOSE LIFE! PROGRAM

## RELIGIOUS EDUCATION SCHEDULING FORM 2024-25

Church Name \_\_\_\_\_ Date \_\_\_\_\_

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

\_\_\_ **YES**, we would like the Choose Life! Program for \_\_\_ Religious Education \_\_\_ Sunday School \_\_\_  
Grade 6\_\_\_ Grade 7\_\_\_ Grade 8\_\_\_ High School Grade \_\_\_  
Youth Group \_\_\_ Life Teen \_\_\_ Confirmation class/retreat \_\_\_

\_\_\_ **NO**, our schedule does not permit the Choose Life! Program at this time; but please contact us again.

**THE CHOOSE LIFE! RELIGIOUS EDUCATION PROGRAM – 2 SESSIONS OF 60-90 MINUTES EACH.  
CONFIRMATION RETREATS OR YOUTH GROUP SESSIONS MAY BE UP TO 120 MINUTES.**

**Grades 6-8: \$100 fee each grade; a second class of the same grade would have a reduced fee of \$60.  
(Each class would consist of no more than 30 students; additional students \$3 each.)**

**YOUR PARISH'S "ROOTED IN FAITH" GRANT MAY BE USED TO COVER OUR FEES. QUESTIONS: 216-661-6616**

**Please rank sessions in order of your 1st and 2nd preference:**

\_\_\_ Fall Session – September through mid- December      \_\_\_ Winter Session – January through mid-March  
\_\_\_ Spring Session – Mid-March through May                      \_\_\_ Summer Session – June through August

**Religious Education/Sunday School - Middle School:**

**Day & Time of Class: Example: Monday, 7-8:15 p.m.**

6A \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_  
6B \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_  
7A \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_  
7B \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_  
8A \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_  
8B \_\_\_\_\_ # students \_\_\_\_\_ Room # \_\_\_\_\_ Catechist \_\_\_\_\_

**High School Religious Education, Youth Ministry, Confirmation, Life Teen:**

**Day & Time of Class:** \_\_\_\_\_ **Grade** \_\_\_\_\_ **# students** \_\_\_ **Room #** \_\_\_ **Catechist** \_\_\_\_\_

**Day & Time of Class:** \_\_\_\_\_ **Grade** \_\_\_\_\_ **# students** \_\_\_ **Room #** \_\_\_ **Catechist** \_\_\_\_\_

**Day & Time of Class:** \_\_\_\_\_ **Grade** \_\_\_\_\_ **# students** \_\_\_ **Room #** \_\_\_ **Catechist** \_\_\_\_\_

**Sessions held in:** \_\_\_ church \_\_\_ school other building name \_\_\_\_\_

**Contact person's name/email/phone:** \_\_\_\_\_

\_\_\_\_\_ **DVD player** Yes\_\_\_ No\_\_\_ **Wi-Fi available** \_\_\_ **You Tube Access:** Yes \_\_\_ No \_\_\_

**IF YOU TUBE IS BLOCKED, PLEASE BE SURE INSTRUCTOR KNOWS THE PASSWORD TO OVERRIDE THE BLOCK.**

**Computers:** Mac \_\_\_ PC \_\_\_ Smart TV \_\_\_ Version of Power Point (year) \_\_\_\_\_

**Snow closings are listed on Internet/TV as:** \_\_\_\_\_

**Do any students have special needs?** \_\_\_\_\_

**Miscellaneous Information:** \_\_\_\_\_

**Please send to: Vicky Follen LifeWorks Ohio 4429 State Road, Suite 23 Cleveland, OH 44109**

**Or e-mail to: [Director@LifeWorksOhio.org](mailto:Director@LifeWorksOhio.org) Phone: 216-661-6616 Thank you!**

**We welcome your contacting us with questions. You may share our contact information with parents.**