



Valentine's Day

Dress Down Day is coming...

with

a chance for you to share your love

Bring a canned food item to support our
community and wear your

Valentine's Day colors on

February 14th!

Jesus calls us
to love one
another. Even
ones who are
unlovely. Jesus
loved the
unloved and
unlovely. Love
others as God
loves us.



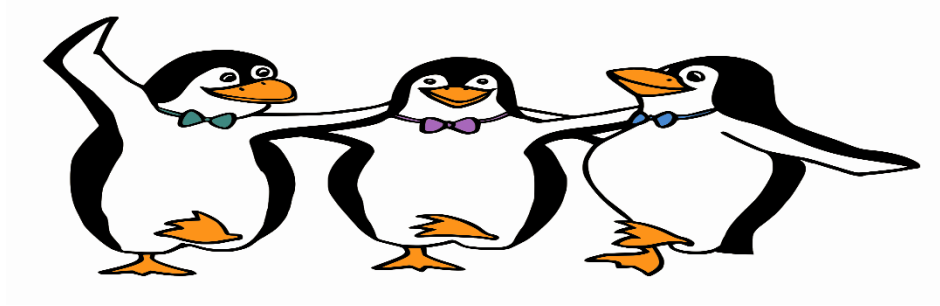


It's that time!

Please check your e-mail
(and spam folder) for your
Re-registration Code
and go on the Tads website
to finish your registration for
the Kingston Catholic
2020-2021 School Year!

It's time for the Winter Dance!

Grades 5-8



Friday, February 28th

6:30-8:30pm

\$10.00/student

Featuring DJ Ming

**I give permission for my child _____ to
attend the KCS Winter Dance.**

**He/She will be picked up by _____ at
8:30pm.**

Medical Concerns: _____

Parent Signature: _____



VALENTINE'S DAY CONTEST
GUESS HOW MANY KISSES
ARE IN THE JAR & WIN THE JAR
GUESSES are .50c each / 3 for \$1.00
SPONSORED BY THE KINGSTON
CATHOLIC STUDENT COUNCIL
(Students will be able to guess at lunch time)

**KINGSTON CATHOLIC SCHOOL
WEEKLY SCHEDULE FOR EARLY DROP OFF**

***Early Drop off time is 7:30am
The Cost is \$15 per week***

FAMILY NAME _____

February 17, 2020

WEEK OF _____

Parent/Guardian, kindly indicate in the appropriate box name and grade,
And please mark the days you need early drop off.

Child's Name & Gr. Mon. Tues. Wed. Thurs. Fri.

	No School				
Early Drop Off Time					

RETURN TO SCHOOL BY **Friday** ALONG WITH PAYMENT.

PARENT SIGNATURE _____

KINGSTON CATHOLIC SCHOOL WEEKLY SCHEDULE FOR EXTENDED DAY PROGRAM

FAMILY NAME _____

February 17, 2020

WEEK OF _____

Parent/Guardian - kindly indicate in the appropriate box name, grade and pick-up time.

Please X the days you need aftercare.


Child's Name & Grade	Mon.	Tues.	Wed.	Thurs.	Fri.
	No School				
Pick up time					

RETURN TO SCHOOL BY **Friday** ALONG WITH PAYMENT.

PARENT SIGNATURE _____

For those parents who need a receipt other than your check, fill in the form below and tear it off for your records. This will serve as your receipt for the aftercare program:

~~~~~



Kingston Catholic School Aftercare Receipt

Family Name: \_\_\_\_\_ Child's Name: \_\_\_\_\_

Week Of: \_\_\_\_\_ # of Days Used: \_\_\_\_\_

Amount Paid: \_\_\_\_\_ Check (Check #): \_\_\_\_\_

**(NO CASH PLEASE)**



**KINGSTON CATHOLIC HOT LUNCH MENU**  
**Week of February 17, 2020**

NAME(S) & GRADE(S) \_\_\_\_\_

**MONDAY**

**NO SCHOOL**

**TUESDAY**

Pasta, Garlic Knots,  
Dessert

-----  
Luncheon Salad,  
Applesauce, Dessert      please check one: ☐ Ranch    ☐ Italian

**WEDNESDAY**

Chicken Nuggets,  
Carrots, Dessert

-----  
Luncheon Salad,  
Applesauce, Dessert      please check one: ☐ Ranch    ☐ Italian

**THURSDAY**

Mac & Cheese  
Carrots & Celery Sticks,  
Dessert

-----  
Luncheon Salad,  
Applesauce, Dessert      please check one: ☐ Ranch    ☐ Italian

**FRIDAY**

Pizza  
Chips, Dessert

-----  
Luncheon Salad,  
Applesauce, Dessert      please check one: ☐ Ranch    ☐ Italian

- Each lunch is **\$5.00**.
- Please remember to put your child's name and grade on this menu.
- Please remember to include your check.

A second slice of pizza may be ordered along with the first for an extra \$1.00 (unfortunately the "seconds for a dollar" option is not available with any other lunch).

**LUNCH MENU MUST BE IN BY *FRIDAY* MORNING ALONG WITH PAYMENT –**  
**THANK YOU FOR YOUR COOPERATION *Lunch menus will not be accepted***  
***on Monday morning so please plan accordingly***

The monthly menu can be found at [www.kingstoncatholic.org](http://www.kingstoncatholic.org)



# SHROVE TUESDAY

Shrove Tuesday, also known as Fat Tuesday or Mardi Gras, is the day before Ash Wednesday. Shrove Tuesday marks the beginning of the Lenten period, and over the years has taken on a festive nature as a feast day in anticipation of the fast that begins on Ash Wednesday.

The KCSFO would like to offer a pancake lunch to our students and we are looking for 3-4 daytime volunteers to make the pancakes. This is a great opportunity for Grandparents and families to volunteer in the kitchen.

**DATE: Tuesday February 25th**

**TIME: 11:00-1:00**

If you are available to help, please contact the main office or Melissa at [mazimmer@hotmail.com](mailto:mazimmer@hotmail.com)





Dear Families,

Please continue to send in your ticket stubs for our Giant raffle as you sell them- you don't need to wait until March 5th to send them in.

If you are looking for a place to sell additional tickets, Father Bill has given students permission to sell the raffle tickets in the church vestibule after mass. Please let him know before mass so he can make an announcement. Students should wear their uniforms. Additional tickets are available in the main office. Please check your local churches as well!

Thank you for your help reaching our goal!

The KCSFO

# Kingston Catholic School **GIANT RAFFLE**

**First Prize**  
**\$500**

**Second Prize**  
**\$250**

**Third Prize**  
**\$150**

**Fourth Prize**  
**\$100**

The drawing will be held  
**March 6**  
*at the family assembly.*

Deadline for tickets sold and returned to the office is  
**March 5**

*Tickets are \$5 each or 6 for \$25. Additional tickets available in the office*



Our goal is to sell a total of  
**2,500 TICKETS!!!**



If we reach this goal Mrs. Albert will award the  
entire school a kickball game and pizza lunch!

We will also give each of the  
top two sellers a \$50 gift card.

*If a minimum of 500 tickets are not sold, the raffle will not be held and all money will be refunded.*



159 Broadway  
Kingston, NY 12401  
KingstonCatholicSchool.com  
Phone: (845) 331-9318  
(845) 339-4390

## Kingston Catholic School

The Catholic School Region of Ulster, Sullivan and Orange Counties  
Mrs. Jill Albert, Principal

January 27, 2020

Dear Kingston Catholic School Family,

The 2019-2020 school year is certainly off to a wonderful start. We have watched our children grow physically, academically, socially and spiritually. We have flourished as a faith based school community. The KCSFO has planned numerous social events and fundraisers to make Kingston Catholic School the best school it can be. Fundraising is an important aspect of our school and we appreciate all the support our KCS families give throughout the school year.

The KCSFO has decided to kickoff this year's Catholic School's week with a giant raffle. We wanted to offer a fundraising opportunity that would allow families the flexibility to raise money for their school on their time. This would allow all KCS families the chance to reach out to relatives, friends, parishioners, neighbors etc. to offer them the opportunity to win big.

Enclosed you will find 3 bundles of 6 tickets. Each ticket is \$5 or 6 for \$25 (buy 5 get one FREE!) We will choose 4 winners during the family assembly on March 6, 2020 and award the following cash prizes: (1) \$500, (2) \$ 250, (3) \$150 and (4) \$100. Our goal is to sell a total of 2,500 tickets!!!! If we reach this goal Mrs. Albert will award the entire school a kickball game and pizza lunch! We will also give each of the top two sellers a \$50 gift card.

Tickets can be returned as soon as possible with a deadline of March 5, 2020. The drawing will be held during the family assembly on March 6, 2020. Winners need not be present. If you have any questions please call Stacey Schuon 845-430-7808 or email [Aileen15@aol.com](mailto:Aileen15@aol.com).



## MARCH 20<sup>th</sup> DEADLINE!

If you will need transportation for the 2020-2021 school year, please fill out the attached form and return it to the school office by March 20, 2020. **Please fill out a separate form for each child.** If your child is being picked up or dropped off at a place other than your residence, an alternative bus form also needs to be filled out. Please call the office and one will be sent home with your child. (Both forms need to be signed and returned if you will have a different pick up or drop off other than your residence.)

It is imperative that you return these forms by the deadline. Some students did not receive transportation this school year because their forms were late. You must reserve your spot on the bus. Even if you do not regularly ride the bus, fill out a form if there is a slight chance you will need it sometime during the school year.

*If you do not need transportation, please sign your name and mark across the form no transportation needed and return it to the office.*

**If you are in a district other than Kingston, please call the office or send a note with your child and the proper form will be sent home to you.**

If you are in need of busing for next year, it is very important to return the form to the office in a timely manner. The districts will not guarantee busing for those who do not send in a transportation form by the deadline.

**KINGSTON SCHOOL DISTRICT**  
**Request for Transportation for School Year: 2020-2021**  
**Fax # 845-943-3215**

Student # \_\_\_\_\_

(For office use only)

(Please return by April 1, 2020)

Date: \_\_\_\_\_

Please return this form to the school to which you are requesting transportation

**\*\*A form must be completed for each child.** In accordance with the laws of the State of New York, I hereby request that transportation be provided for:

|                 |  |
|-----------------|--|
| Name of Student |  |
|-----------------|--|

|                |  |
|----------------|--|
| Street Address |  |
|----------------|--|

|                                   |  |
|-----------------------------------|--|
| Mailing Address<br>(if different) |  |
|-----------------------------------|--|

|     |  |               |  |                           |  |
|-----|--|---------------|--|---------------------------|--|
| Age |  | Date of Birth |  | Grade Level in Sept. 2020 |  |
|-----|--|---------------|--|---------------------------|--|

|                                        |  |
|----------------------------------------|--|
| School requesting<br>Transportation to |  |
|----------------------------------------|--|

|                                 |  |
|---------------------------------|--|
| Signature of Parent or Guardian |  |
|---------------------------------|--|

|                                                                 |  |
|-----------------------------------------------------------------|--|
| Parent or Guardian name &<br>relation to student (Please print) |  |
|-----------------------------------------------------------------|--|

|                             |  |
|-----------------------------|--|
| Home phone # with area code |  |
|-----------------------------|--|

**All information supplied by you on this form will replace any previous information we have on file for you and/or the student.**

|                                                                     | Phone # | Owner of phone # |
|---------------------------------------------------------------------|---------|------------------|
| Emergency phone # with area code<br>& name of owner of this phone # |         |                  |

|                                                                     |  |  |
|---------------------------------------------------------------------|--|--|
| Emergency phone # with area code<br>& name of owner of this phone # |  |  |
|---------------------------------------------------------------------|--|--|

|                                                                     |  |  |
|---------------------------------------------------------------------|--|--|
| Emergency phone # with area code<br>& name of owner of this phone # |  |  |
|---------------------------------------------------------------------|--|--|

|                                                           |  |  |
|-----------------------------------------------------------|--|--|
| Cell phone # with area code<br>& name of owner of phone # |  |  |
|-----------------------------------------------------------|--|--|

|                                                           |  |  |
|-----------------------------------------------------------|--|--|
| Cell phone # with area code<br>& name of owner of phone # |  |  |
|-----------------------------------------------------------|--|--|

**\*\*Student must be 5 years of age on or before December 1<sup>st</sup>.**

**\*\*All schedules will be available in the Weekly Online Envelope\*\***

## James & the Giant Peach, Jr. Weekly Rehearsal Schedule February 16 - February 22

| DAY       | DATE | TIME                | WHAT                                                                                                                                                 | WHO                                                                                                                                                                        |
|-----------|------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Mon       | 2/17 | 10:00 AM - 12:00 PM | Staging <ul style="list-style-type: none"> <li><i>Shake It Up</i></li> </ul>                                                                         | <ul style="list-style-type: none"> <li>ALL (Grades 3-8)</li> </ul> <p><b>**Pick up for all but those called after lunch is 12:00 PM**</b></p>                              |
| NO SCHOOL |      | 12:00 - 12:30 PM    | LUNCH                                                                                                                                                |                                                                                                                                                                            |
|           |      | 12:30 - 1:30 PM     | Staging <ul style="list-style-type: none"> <li>Scene 1, pgs. 13-14, Scene 6, pgs. 59-62</li> <li>Scene 6, pgs. 64-66, Scene 6, pgs. 73-75</li> </ul> | <ul style="list-style-type: none"> <li>Kaya, Kay, Aaron, Lucy, Madison, Matthew, Thomas L.</li> </ul>                                                                      |
|           |      | 1:30 - 3:00 PM      | Staging <ul style="list-style-type: none"> <li><i>Floating Along</i></li> </ul>                                                                      | <ul style="list-style-type: none"> <li>Kay, Aaron, Lucy, Madison, Matthew, Thomas L.</li> </ul>                                                                            |
| Wed       | 2/19 | 3:00 - 4:15 PM      | Staging <ul style="list-style-type: none"> <li><i>Shake It Up</i></li> </ul>                                                                         | <ul style="list-style-type: none"> <li>ALL (Grades 1-8)</li> </ul>                                                                                                         |
|           |      | 4:15 - 5:15 PM      | Staging <ul style="list-style-type: none"> <li><i>Plump &amp; Juicy</i></li> </ul>                                                                   | <ul style="list-style-type: none"> <li>Thomas L., Kay, Olivia, Lucy, Aaron, Madison, Matthew</li> <li>SEAGULLS: Kaya, Aivlin, Abby, Laura, Gianna, Amara, Gabby</li> </ul> |

Any questions, please email Ms. Tarcza at [nicole.tarcza@kingstoncatholic.org](mailto:nicole.tarcza@kingstoncatholic.org)

# Come join the KCS Shamrock Run Team!



Miss Metelski is heading up this event. If you are interested please fill out the form and send it in to the office along with the entry fee of \$15 (**checks made payable to Shamrock Run**). **Please return by February 21<sup>st</sup>**. Any forms and payments brought in after February 21<sup>st</sup> will need to get mailed in by the participant.

Please do not send the registration form directly to the Shamrock Run (we will send in registration forms and fees from here.)

**There is a \$250 prize towards the school PTA/PTO and a trophy for the highest percentage of runners for each school!** (If children are participating in the race, they must be accompanied by an adult on race day.)

# Join the Kingston Catholic School team!



Irish Cultural Center Hudson Valley presents the 32ND ANNUAL



for the

## shamrock Run



To Benefit *Raising Your Awareness about Narcotics*



**Sunday, March 15th, 2020 — 12:50 p.m. (sharp!)**

**Academy Green, Kingston**

**Flat, Fast and First Class — only 2 miles**



Honoring  
**TEAM IRELAND**  
Coordinators of the  
Shamrock Run the  
first 25 years

No refunds, exchanges, or transfers.

No animals will be permitted to accompany the runners.

In consideration of accepting this entry, I the undersigned, intending to be legally bound for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against the Ancient Order of Hibernians, the Irish Cultural Center Hudson Valley, the City of Kingston Parks and Recreation Department, the City of Kingston, and any and all sponsors, and their representatives, successors and assigns for any and all injuries suffered by me in this event. I attest and verify that I am physically fit and have trained sufficiently for this event and my physical condition has been verified by a licensed medical doctor. I hereby grant full permission to use photographs, videotapes, recordings or any other record of this event for promotional purposes.

### \$15 PER RUNNER/ WALKER

1. Please fill out the form to the right for each member of your family that will be running. If you need additional space, please add names and signatures to the back of the form.  
**Circle the preferred T-Shirt size or choose Pint Glass.**

2. Include the email address or phone number for ONE member of the family. You will be contacted a few days before the race regarding TShirt/Race number Distribution and Race Day meeting time/location.

3. Return this form WITH YOUR PAYMENT to your child's teacher.

**FORMS AND MONEY  
DUE FRIDAY  
FEBRUARY 21st**

Checks should be made payable to **SHAMROCK RUN**. The cost is **\$15 for each runner/walker**.

For more information, contact your Team Leader:

|                                                                                 | Teacher:                                                        | Grade: |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------|--------|
| <b>RUNNER 1</b>                                                                 | <input type="checkbox"/> STUDENT                                |        |
|                                                                                 | <input type="checkbox"/> NON-STUDENT                            |        |
|                                                                                 | Last Name First Name                                            |        |
|                                                                                 | Email Address for adult contact Phone                           |        |
| T-Shirt Size (circle one): Youth L   S M L XL XXL or Pint Glass                 |                                                                 |        |
| Signature of Participant or Signature of Parent or Legal Guardian (if under 18) |                                                                 |        |
| <b>RUNNER 2</b>                                                                 | <input type="checkbox"/> STUDENT                                |        |
|                                                                                 | <input type="checkbox"/> NON-STUDENT                            |        |
|                                                                                 | Last Name First Name                                            |        |
|                                                                                 | T-Shirt Size (circle one): Youth L   S M L XL XXL or Pint Glass |        |
| Signature of Participant or Signature of Parent or Legal Guardian (if under 18) |                                                                 |        |
| <b>RUNNER 3</b>                                                                 | <input type="checkbox"/> STUDENT                                |        |
|                                                                                 | <input type="checkbox"/> NON-STUDENT                            |        |
|                                                                                 | Last Name First Name                                            |        |
|                                                                                 | T-Shirt Size (circle one): Youth L   S M L XL XXL or Pint Glass |        |
| Signature of Participant or Signature of Parent or Legal Guardian (if under 18) |                                                                 |        |
| <b>RUNNER 4</b>                                                                 | <input type="checkbox"/> STUDENT                                |        |
|                                                                                 | <input type="checkbox"/> NON-STUDENT                            |        |
|                                                                                 | Last Name First Name                                            |        |
|                                                                                 | T-Shirt Size (circle one): Youth L   S M L XL XXL or Pint Glass |        |
| Signature of Participant or Signature of Parent or Legal Guardian (if under 18) |                                                                 |        |



# **Presentation of the Blessed Virgin Mary & Sacred Heart Parish**

## **1950's Throwback Dinner RESERVATIONS STRONGLY RECOMMENDED**



When: Saturday, February 29th 5:00PM – 8:00PM  
Where: Esopus Town Hall  
284 Broadway

Includes: Meatloaf, Mashed Potatoes, Corn, Macaroni & Cheese, Salad, Dessert,  
Water & Ice Tea.  
Root Beer Floats \$1.00 each (sold separately)

### **TICKETS:**

|                 |                 |                   |
|-----------------|-----------------|-------------------|
| Advance tickets | \$12.00 13 & up | \$5.00 12 & under |
| Door tickets    | \$15.00         |                   |

**\*\*Tickets will be going on sale after each weekend Mass starting February 15th\*\***

|                          |                                  |
|--------------------------|----------------------------------|
| Presentation of the BVM: | 4pm (Saturdays) & 10am (Sundays) |
| Sacred Heart:            | 8am (Sundays)                    |

**Gift Baskets**

**Gift Baskets**

**Gift Baskets**

Reservations: Bernice- 845-338-6486 Mimi- 917-710-8149



## Get your Parade Hoodie & Long sleeve T!

Get your Kingston Catholic School Shamrock Run/parade hoodie or long sleeve t-shirt!

It can be St. Patrick's Day, March 17<sup>th</sup>, and anywhere else you would like to show our St. Patrick's Day spirit and advertise our school!

Cost: Hoodie - \$25 each

T-Shirt - \$20 each

Please fill out the order form below and return it to school by

***February 21, 2020.***

(Please note - the child's small will be a crew neck sweatshirt, not a hoodie.)

~~~~~

KCS Parade Hoodie/T-Shirt



Name: _____

HOODIES (please check size)

Child's Size: ☐ Small (crew only)

☐ Medium

☐ Large

☐ X-Large

Adult Size: ☐ Small

☐ Medium

☐ Large

☐ X-Large

☐ 2X

☐ 3X

T-SHIRT (please check size)

Child's Size: ☐ Small

☐ Medium

☐ Large

☐ X-Large

Adult Size: ☐ Small

☐ Medium

☐ Large

☐ X-Large

☐ 2X

☐ 3X

of Hoodies _____ @ \$25 each = _____

of T-Shirts _____ @ \$20 each = _____

Amount Enclosed: _____