

Faith Formation Registration 2017-2018

Family Name _____ Address _____

City _____ Zip Code _____ Phone Number _____

Parish where Registered _____

Father's Full Name _____ Marital Status M S D W

Father's Religion _____ Occupation _____

Mother's Full Name _____ Marital Status M S D W

Mother's Religion _____ Occupation _____

E-mail Address _____

**Communication to be mailed to this address if different from above:

Student's Name _____
First Middle Last

Birthdate _____ Baptism Date _____

Place of Baptism _____
Parish City State

Grade _____ Day School _____

Medical Conditions _____
(See Emergency Authorization)

Student's Name _____
First Middle Last

Birthdate _____ Baptism Date _____

Place of Baptism _____
Parish City State

Grade _____ Day School _____

Medical Conditions _____
(See Emergency Authorization)

Student's Name _____
 First Middle Last

Birthdate _____ Baptism Date _____

Place of Baptism _____
 Parish City State

Grade _____ Day School _____

Medical Conditions _____

Fee for Faith Formation: \$35 for 1st through 8th grade students and \$50 for 9th through 11th grade students. Maximum fee of \$100 per family.

Other Children in the Family

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

I AM INTERESTED IN HELPING IN THE FOLLOWING AREAS:

___ Prayer Checker (You are given a sheet with the prayers being tested)

___ Hall Monitor on Wednesday 4:15 to 5:30 pm or 7:00 to 8:30 pm

___ Bake for Sacrament Meetings or Celebrations

___ Substitute for a Catechist for Grade _____

___ Be a Catechist for Grade _____

___ Chaperone for Youth Ministry Activities

MEDIA RELEASE: This authorization form constitutes permission for my child(ren)'s participation in videotaping and/or photographs which may be taken during the program. These could be used for further promotional videos, website promotions, fliers, or other diocesan or parish appropriate uses.

Signature of Parent/Guardian _____