

Imm.Conception/St. Wenceslaus Faith Formation Class Registration

2018/2019

Father's Full Name _____ Religion _____

Mother's Full Name _____ Religion _____

Address _____ City/Zip _____

E mail address _____

Home phone _____ Cell phone _____

Non-custodial parent, if applicable _____

Address _____ City/Zip _____

Home Phone _____ Cell phone _____

Emergency Contact _____

Address _____ City/Zip _____

Home phone _____ Cell Phone _____

Children to Register...First, Middle, Last name please

Child _____ Date Birth _____ Grade _____ School _____

Sacraments received and date received

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____

Child _____ Date Birth _____ Grade _____ School _____

Sacraments received and date received

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____

Child _____ Date Birth _____ Grade _____ School _____

Sacraments received and date received

Baptism _____ Reconciliation _____ Communion _____ Confirmation _____

Cost of Registration is as follows:

\$55.00 for one student

\$90.00 for two students

\$140.00 for three or more students

Are there any physical limitations for student? _____

Are there any allergic reactions? _____

In emergency situations like vomiting, fever, etc. I want to be notified. _____

Permission to give student Tylenol, aspirin, if necessary _____

Consent Forms

Dual Parent Reporting

Archdiocesan Policy #5124 states, "Unless otherwise decreed in the Order of Dissolution, information commonly made available to parents of any student in attendance (i.e., notices of school/catechetical program functions, report cards, appointments for parent-teacher conferences) should be provided to both parents."

In the case of a child whose parents are in separated circumstances, a follow-up form will need to be completed and returned.

___ Please send a form to complete and return.

Media Release and Authorization

I understand that by signing this Release and Authorization I hereby grant authority to _____ for the use of any videotapes, photographs, or (parish/cluster) similar items in which my child/children might appear, or statements made by them, in the production, display or sale of public service announcements.

Parent/Guardian signature

Date