



Faith Formation Registration Form 2017-2018

Child /Children's information (Please fill out one form per family)

Family Name: _____ Family # _____

New Registration*Please fill out Sacramental information

First Name	Last Name	D.O.B	M/F	Level	Session Requested		For Office Use Only
					1 st Choice	2 nd Choice	Placement

Parent(s)/Guardian Information

Name(s): _____
First Last

_____ First Last

Address _____

Phone:(H) _____ (C) _____ Email _____

Phone:(H) _____ (C) _____ Email _____

Preferred phone to be contacted during class time: _____

Emergency Contact other than Parent/Guardian: _____

*Sacramental Information (For NEW Registrants)

Date of Baptism: _____ Parish : _____

Name City, State

Date of First Communion : _____ Parish : _____

Name City, State

The Office of Faith Formation will no longer be sending out reminders via mail or email. Any important forms, documents or sacramental notifications will still be sent via mail or handed out during meeting.

Choose one of the following:

By selecting this box, I agree that it is my responsibility to download the My Parish App. This app will provide me with Faith Formation updates regarding snow closures, important meeting dates and any information regarding the program. (Text "App" to 88202 to download the app or search "MyParish" in the App Store or Google Play Store)

Initial here _____

By selecting this box, I agree that it is my responsibility to check the parish website for any Faith Formation snow closures, important meeting dates and any information regarding the program.

Initial here _____

Additional Information (Please indicate child's name next to Special Consideration and Allergies)

Special Considerations: _____

Allergies: _____

If your child has an IEP, please include a copy

Faith Formation takes photographs of children at "all events", including classes, and liturgies for use in various newsletters, presentations, articles, publications and/or parish website. **I DO** **DO NOT** give permission for my child's likeness/name to be included.

Signature of Parent/Guardian _____ Date: _____

Formation Office Use Only

Date Received _____

Reg. Fee	Check Amount	Check #	Cash Amount	Sacramental	Credit Card	Amt. Paid	Date	Initial

Minimum Fee of \$50.00 is due at the time of Registration