

SAINT MARY PARISH FAITH FORMATION REGISTRATION

Date _____ Family Last Name _____ Family E-mail Address _____

Both Parent's or Guardian's Full Names, including Maiden Name, if applicable _____ Telephone Number _____ Cell Phone Number _____

Street Address _____ Mailing Address _____

Emergency Contact – Name and Address _____ Telephone Number _____ Cell Phone Number _____

Please Indicate Dates Sacraments Received

Child's First Name _____ Last Name (if different from family name) _____ DOB _____ Grade _____ Baptism _____ First Reconciliation _____ First Eucharist _____

Child's First Name _____ Last Name (if different from family name) _____ DOB _____ Grade _____ Baptism _____ First Reconciliation _____ First Eucharist _____

Child's First Name _____ Last Name (if different from family name) _____ DOB _____ Grade _____ Baptism _____ First Reconciliation _____ First Eucharist _____

Is there special information about your child's health needs or learning style that would be helpful for us to share with your child's teacher?

PROGRAM VOLUNTEERS NEEDED

Please check below if you are willing to help with any of these volunteer positions to help our program grow:

Grades K-6: Catechist ___ Aide ___ Substitute ___ **Grades 7-8:** Catechist ___ Aide ___ Substitute ___ **Confirmation:** Catechist ___ Aide ___ Substitute ___

Special Class Assistance: Fall ___ Spring ___ Planning ___ Shopping ___ Baking ___ Cooking ___ Setup ___ Serving ___ Clean Up ___ Other _____

Office Assistant _____ **Youth Leadership Assistant** _____

Registration Fee: \$60 first child; \$50 second child - max \$125 per family; \$40 sacramental fee; \$17 book fee – grades K thru 8. Make checks payable to Saint Mary Parish.

Registration Fee: _____ **Sacramental Fee:** _____ **Book Fee:** _____ **Amount Paid:** _____ **Date Paid:** _____ **Check #** _____