

**Saint Paul Church**

**Faith Formation Registration**

**School Year:** \_\_\_\_\_

(one form per family)

**Students:**

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_ School \_\_\_\_\_

**Guardians:**

Child/Children live with : \_\_\_\_\_ Both Parents \_\_\_\_\_ Mom \_\_\_\_\_ Dad \_\_\_\_\_ Other\*

(\*explain) \_\_\_\_\_

Any restraining orders/court orders? YES NO If yes, please explain on a separate sheet.

Mother's First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

Cell # \_\_\_\_\_ Email Address \_\_\_\_\_

Father's First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Cell# \_\_\_\_\_ Email Address \_\_\_\_\_

Family's Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone# \_\_\_\_\_

Registered members of Saint Paul Parish? \_\_\_\_\_ YES \_\_\_\_\_ NO, please send me a form to register

My child/children are allowed to walk home from class. (Please check one) \_\_\_\_\_ YES \_\_\_\_\_ NO

Who will pick your child/children up from class? (Please send in a note if someone other than those listed here will pick your child up).

\_\_\_\_\_

Please list any medical conditions/special needs for each child. (allergies, medical issues, language/learning difficulties, etc.)

\_\_\_\_\_

\_\_\_\_\_

**PLEASE COMPLETE OTHER SIDE**

**Policy regarding photographs:** I understand that photographs of my child/children may occasionally be taken during Faith Formation class, on field trips, or when participating in a special event. These photos may be used by teachers for a class project or for display, and may possibly be selected for future use in a parish publication (i.e. a parish directory). Photos may possibly be included on the photo gallery of our parish website or the Saint Paul Faith Formation Facebook page. IF my child/children appear in a photo selected for use, he/she/they will NEVER be identified by name.

**Program policies:** Attending weekly Mass, weekly class and Sacramental preparation sessions are requirements of program participation. I understand that failure to fulfill these obligations may result in a delay in receiving Sacraments.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_  
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**If registering a child/for the FIRST TIME, please fill in the following information:**

Student Name	DOB	Circle any Sacraments Received	Name of church
_____	_____	Baptism / Reconciliation / Communion	_____
_____	_____	Baptism / Reconciliation / Communion	_____
_____	_____	Baptism / Reconciliation / Communion	_____
_____	_____	Baptism / Reconciliation / Communion	_____

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**PARENTS - AN INVITATION FOR YOU:**

Is God calling you to grow in your faith? Being involved in our Faith Formation Program may be the opportunity you have been waiting for! Please prayerfully consider if you are being called to become a:

- **Catechist**
- **Catechist's Assistant**
- **Substitute Catechist**
- **Children's Liturgy Leader** (Lead or assist w/lessons for young children in the sacristy during 9:30AM Sunday Mass.)
- **Guardian Angel** (Monitor doors during arrival & dismissal on Sunday mornings; Be a presence in the building during classes.)
- **Baker** (Occasionally be asked to send in a baked good for special classes, meetings, events, etc.)

The more volunteers we have, the better our program will become. Excellent resources and support are provided for teaching positions. All adults who work with children must pass a background criminal investigation and complete a Safe Environment Training session in accordance with diocesan regulations.

\_\_\_\_ Yes, I would like to be involved! Please contact me! (Please circle area(s) of interest on the list above).

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**Office Use Only**

Total # of students registered _____			
Total Amount Due:    \$50/one child        \$75/two children        \$100/three or more children			
1 <sup>st</sup> Payment Rec'd: _____ / _____	Cash / Check# _____	Balance Due: _____	
(date) (amount)			
Payment Made : _____ / _____	Cash / Check# _____	Balance Due: _____	
(date) (amount)			
Payment Made : _____ / _____	Cash / Check# _____	Balance Due: _____	
(date) (amount)			