

*Family Last Name* \_\_\_\_\_

**Faith Formation Program Registration Form**

**Site:** St. Thomas Aquinas

**Year:** 2017-2018

<i>Father's Full Name</i>	<i>Religion</i>
<i>Mother's Full Name</i>	<i>Religion</i>
<i>Mother's Maiden Name</i>	
<i>Address (of custodial parent)</i>	<i>City</i>
<i>State/Zip</i>	<i>E-mail</i>
<i>Home Phone</i>	<i>Other Phone</i>
<i>Non-custodial Parent (if applicable)</i>	<i>Religion</i>
<i>Address</i>	<i>City</i>
<i>State/Zip</i>	<i>E-mail</i>
<i>Home Phone</i>	<i>Other Phone</i>
<b>EMERGENCY CONTACT</b>	<b>Relationship</b>
<b>Home Phone</b>	<b>Other Phone</b>

<i>Children/Youth to Register First, Middle, Last Name Please</i>	<i>Birth Date</i>	<i>Gender</i>	<i>Age</i>	<i>Grade</i>	<i>Baptism</i>	<i>Reconciliation</i>	<i>Communion</i>	<i>Confirmation</i>
1.					<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>
2.					<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>
3.					<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>
4.					<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>
5.					<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>	<i>Yes/No</i>

*Please list all persons living in your home:*

*Do any of the children enrolled have chronic illnesses or physical limitations?* *Yes No*

*Do any of the children have any type of learning difficulty?* *Yes No*

*Do any of the children attend special education classes or utilize a 504 or IEP Plan in the public school?* *Yes No*

*If yes to any of these questions, please give the name of the child, any information we made need, and how we can help:*

*If you are new to our program, please indicate level of prior Faith Formation training and any other information you feel would help us in working with your child/children:*

**REGISTRATION FEE is \$75.00 per household with two children or less and \$100 per household with three or more children**

*Additional fees may be collected for retreats, rallies, and/or field trips as necessary.*

**SACRAMENTAL PREPARATION: There is not an additional sacramental fee.**

**First Reconciliation & First Eucharist:**

\_\_\_\_\_ will be preparing for the  
**Sacraments of Reconciliation & Eucharist.**

**Confirmation:**

\_\_\_\_\_ will be preparing for the  
**Sacrament of Confirmation.**

=====

**For Internal Use Only:**

**Amount Paid** \_\_\_\_\_ **Date Paid** \_\_\_\_\_

**Cash/Check** \_\_\_\_\_

**Sacramental Fee (if applicable)** \_\_\_\_\_

**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