

FAMILY INFORMATION

Family Last Name: _____ **Date:** _____
Father's Name: _____ Father's Cell / Work: _____
Mother's Name: _____ Mother's Cell / Work: _____
Mother's Maiden: _____ Email Address: _____
Home Phone: _____ **Emergency Contact:** _____
Home Address: _____ Emergency Phone: _____
City, ST Postal: _____ Live with both Parents? Yes / No

STUDENT #1 INFORMATION

Child Name: _____
Gender: Male Female **Sacrament Details** Check & Date All Below
Birth Date: _____ Baptism: _____
Grade: _____ Eucharist: _____
Session: _____ Reconciliation Prep: _____
Class: _____ Confirmation: _____

Special Needs(Medical, Learning Disabilities, Physical Disabilities, etc) and **Allergies:**

STUDENT #2 INFORMATION

Child Name: _____
Gender: Male Female **Sacrament Details** Check & Date All Below
Birth Date: _____ Baptism: _____
Grade: _____ Eucharist: _____
Session: _____ Reconciliation Prep: _____
Class: _____ Confirmation: _____

Special Needs(Medical, Learning Disabilities, Physical Disabilities, etc) and **Allergies:**

NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

Tuition DUE: \$ _____ **Tuition PAID:** \$ _____ **Signature:** _____

FAITH FORMATION REGISTRATION

2018-19

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St. Mary Church 45 Freestone Ave., Portland, CT 06480
860-342-2308; stmaryportlandfaith@gmail.com

Faith Formation Class Options (To enter on page 1)

Grade

Class

Grades 8 & 9	Two Sundays per month, 6 – 7:30 p.m.
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Confirmation Fees

Registration Fee: \$50/child *Catechist /Aide /Hall Monitor’s children attend for no Registration fee.

Retreat Fee: \$25 (grades 8 & 9)

Robe Fee: \$15 (grade 9 only)

Teacher ___ Gr. _____ Teacher Aide ___ Gr. _____ Hall Monitor during class time ___ Day _____

Father’s Occupation _____ Mother’s Occupation _____

Child(ren) lives with: Mother Father Both

***Please indicate any allergies on the “special needs” line of page 1.**

<p>I give permission for my child/children’s pictures taken at parish sponsored events to appear either in printed photographs in the church or Faith Formation program, or on the parish website.</p> <p>Parent/Guardian Signature _____</p>

We ask all families to continue to bake in support of the Sisters of Mercy annual bake sale.

Other ways you can help with the success of the Faith Formation Program:

Substitute Teacher _____ First Communion Reception _____ Confirmation Reception _____

Additional Students

STUDENT #3 INFORMATION

Child Name: _____

Gender: Male Female

Birth Date: _____

Grade: _____

Session: _____

Class: _____

Sacrament Details Check & Date All Below

Baptism: _____

Eucharist: _____

Reconciliation Prep: _____

Confirmation: _____

Special Needs(Medical, Learning Disabilities, Physical Disabilities, etc) and **Allergies:**

STUDENT #4 INFORMATION

Child Name: _____

Gender: Male Female

Birth Date: _____

Grade: _____

Session: _____

Class: _____

Sacrament Details Check & Date All Below

Baptism: _____

Eucharist: _____

Reconciliation Prep: _____

Confirmation: _____

Special Needs(Medical, Learning Disabilities, Physical Disabilities, etc) and **Allergies:**

STUDENT #5 INFORMATION

Child Name: _____

Gender: Male Female

Birth Date: _____

Grade: _____

Session: _____

Class: _____

Sacrament Details Check & Date All Below

Baptism: _____

Eucharist: _____

Reconciliation Prep: _____

Confirmation: _____

Special Needs(Medical, Learning Disabilities, Physical Disabilities, etc) and **Allergies:**
