

FAITH FORMATION REGISTRATION FORM 2010-2011

FAMILY LAST NAME _____ Home phone _____

Address _____ Email _____

Mother's First Name _____ Father's First Name _____

FAMILY-CENTERED PROGRAMS (FIRE/Generations of Faith) – Please fill in children's information below.

WEEKLY PROGRAMS - Fill in children's information and check desired session.

CHILD ONE	_____	_____	_____	_____
	Last Name	First Name	Birthday	Grade in 9/2010
<i>Check session and check sacramental preparation if needed:</i>				
<input type="checkbox"/> Preschool Program:	<input type="checkbox"/> 5:30 Mass	<input type="checkbox"/> 8:00 Mass	<input type="checkbox"/> 10:00 Mass	
<input type="checkbox"/> Elementary RE:	<input type="checkbox"/> Monday – 6:00	<input type="checkbox"/> Wednesday – 4:00		
<input type="checkbox"/> Home Teach				
<input type="checkbox"/> Youth RE (grades 6-12):	<input type="checkbox"/> Sunday – 11:30 AM	<input type="checkbox"/> Sunday – 6:00 PM		
<input type="checkbox"/> Sacramental Prep:	<input type="checkbox"/> Reconciliation	<input type="checkbox"/> 1 st Eucharist	<input type="checkbox"/> Confirmation	
<input type="checkbox"/> Please contact me to discuss my child's special learning needs.				

CHILD TWO	_____	_____	_____	_____
	Last Name	First Name	Birthday	Grade in 9/2010
<i>Check session and check sacramental preparation if needed:</i>				
<input type="checkbox"/> Preschool Program:	<input type="checkbox"/> 5:30 Mass	<input type="checkbox"/> 8:00 Mass	<input type="checkbox"/> 10:00 Mass	
<input type="checkbox"/> Elementary RE:	<input type="checkbox"/> Monday – 6:00	<input type="checkbox"/> Wednesday – 4:00		
<input type="checkbox"/> Home Teach				
<input type="checkbox"/> Youth RE (grades 6-12):	<input type="checkbox"/> Sunday – 11:30 AM	<input type="checkbox"/> Sunday – 6:00 PM		
<input type="checkbox"/> Sacramental Prep:	<input type="checkbox"/> Reconciliation	<input type="checkbox"/> 1 st Eucharist	<input type="checkbox"/> Confirmation	
<input type="checkbox"/> Please contact me to discuss my child's special learning needs.				

CHILD THREE	_____	_____	_____	_____
	Last Name	First Name	Birthday	Grade in 9/2010
<i>Check session and check sacramental preparation if needed:</i>				
<input type="checkbox"/> Preschool Program:	<input type="checkbox"/> 5:30 Mass	<input type="checkbox"/> 8:00 Mass	<input type="checkbox"/> 10:00 Mass	
<input type="checkbox"/> Elementary RE:	<input type="checkbox"/> Monday – 6:00	<input type="checkbox"/> Wednesday – 4:00		
<input type="checkbox"/> Home Teach				
<input type="checkbox"/> Youth RE (grades 6-12):	<input type="checkbox"/> Sunday – 11:30 AM	<input type="checkbox"/> Sunday – 6:00 PM		
<input type="checkbox"/> Sacramental Prep:	<input type="checkbox"/> Reconciliation	<input type="checkbox"/> 1 st Eucharist	<input type="checkbox"/> Confirmation	
<input type="checkbox"/> Please contact me to discuss my child's special learning needs.				

CHILD FOUR _____ Birthday _____ Grade in 9/2010 _____
 Last Name First Name
 Check session and check sacramental preparation if needed:
 Preschool Program: 5:30 Mass 8:00 Mass 10:00 Mass
 Elementary RE: Monday – 6:00 Wednesday – 4:00
 Home Teach
 Youth RE (grades 6-12): Sunday – 11:30 AM Sunday – 6:00 PM
 Sacramental Prep: Reconciliation 1st Eucharist Confirmation
 Please contact me to discuss my child's special learning needs.

CHILD FIVE _____ Birthday _____ Grade in 9/2010 _____
 Last Name First Name
 Check session and check sacramental preparation if needed:
 Preschool Program: 5:30 Mass 8:00 Mass 10:00 Mass
 Elementary RE: Monday – 6:00 Wednesday – 4:00
 Home Teach
 Youth RE (grades 6-12): Sunday – 11:30 AM Sunday – 6:00 PM
 Sacramental Prep: Reconciliation 1st Eucharist Confirmation
 Please contact me to discuss my child's special learning needs.

RE PROGRAM FEE PER Family BEFORE June 30th (\$15); **AFTER June 30th** (\$20) \$ _____

Include any additional fees that apply:

- Book Fees: Preschool and Elementary** - \$15 per child \$ _____
- Book Fees: 6th grade** - \$20 Youth Bible & \$16 Catholic Handbook (**total \$36**) \$ _____
- Book Fees: 7-12th grade** - \$36 only if your child is **NEW** to the program \$ _____
- Book Fees: 1st Reconciliation** -\$15 per child \$ _____
- Book Fees: 1st Eucharist** - \$15 per child \$ _____
- Book Fees: Family-Centered Program, FIRE** - \$30 per family \$ _____
- Book Fees: Home Teaching** - \$15 per child \$ _____
- Confirmation:** - \$15 per child \$ _____

TOTAL.....\$ _____

\$10 discount for Catechists/Coaches - _____

TOTAL ENCLOSED \$ _____

Request for Fee to be waived