Faith Formation Registration 2023-2024

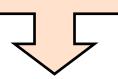
Family Information

| Father's full name | e | | | |
|--------------------------|--|-----------------------------|--------------------------------|---|
| | First | Middle | | Last |
| Mother's full nan | ne | Middle | | Last |
| Parish you attend | | | City | ····· |
| Primary Addres | s: | | | |
| | | | | |
| | | | | |
| Father's phone _ | | Ema | ail | |
| Home phone | · · · · · · · · · · · · · · · · · · · | Other | Email | |
| their time in Faith Form | ation. All photos/vi | ideos will be used in accor | | ry children during the course of cial media practices. The Social arding-Policy-English.pdf (archmil.org) |
| _ | - | - | | |
| to help with any of the | rmation program o copportunities list | ted below. Catechists r | eceive \$100 off their famees. | yerfully consider volunteering hily tuition fees. Aides and itator 9-11 |
| | | | | |
| Program Fee | child \$200 fc | or two children \$300 | ion) for three or more child | \$ ren |
| Catechist discount | | | (subtract \$100) | - \$ |
| Aide / Facilitator d | iscount | | | - \$ |
| ness office is located | d at St. James. A | All parishes, please ma | | |
| | | s. Please call (262) 36 | | , |

Session Information

Class Session

Students from St. Peter, St. Theresa and St. James are welcome to choose any of the classes, regardless of parish affiliation.



St. James St. Peter St. Theresa Tues. 4:30-6:00 K-6 Sun. 10:30-12:00 K-10 Sun. 9:30-11:00 K-8 Wed. 4:30-6:00 K-6 Wed. 2:00-3:30 7-8 Wed. 7:00-8:30 7-11

NEW! Confirmation Prep Summer Option: June 12-16, 10am-3pm at St. James

We ask that children preparing for **First Communion** participate in 2 years of preparation. We also want our families to recognize the importance of ongoing classroom formation as we strive together to bring Jesus to the center of life and family.

Students selecting the **Confirmation Summer Option** must have regularly attended Faith Formation in their 9th and 10th grade years.

Student Information

| Student Name Class Session | Gender Birthdate | already | | Grade K-11 | Special Needs: allergies, health concerns, learning needs | | |
|---|---------------------|--------------------------------|-----|---------------|---|-----------------------------|--|
| Student 1 Name Session Day and Time | M F Birthdate | Baptism 1st Recon. 1st Comm. | | | | | |
| Student 2 Name Session Day and Time | M F | Baptism - 1st Recon 1st Comm. | | | | | |
| Student 3 Name Session Day and Time | M F Birthdate | Baptism - 1st Recon 1st Comm. | | | | | |
| Student 4 Name Session Day and Time | M F | Baptism 1st Recon. 1st Comm. | | | | | |
| First Communion and Confir child's full baptismal name below ar Theresa or St. James, please submit | d the parish of | their bapti | sm. | If your | child was not | t baptized at St. Peter, St | |
| Name First Middle | Last | Baptized | at_ | | Parish | City / State | |
| Emergency Contact if parent | | | | | | | |
| Name | | Relationship | | | | | |
| Office Use Only: Payment Submitted with registration: Check \$ | | | | | | | |
| Check# Check \$_ | | Cash \$_ | | | 10tai | paid \$ | |