

ST. JOHN the BAPTIST FAITH FORMATION REGISTRATION 2021

Please return by August 12th

PARENT(S) INFORMATION:

NAME(S) _____

MAILING ADDRESS _____ CITY _____ ZIP _____

PHONE NUMBER(S) best way to reach you: _____

E-MAIL ADDRESS _____

STUDENT INFORMATION:

(Please fill out additional information on back of this form for ALL 1st & 2nd graders or if you are newly registering in the program)

Name: Last	First	Middle	Grade (Sept. 2021)	M/F
1) _____ / _____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____
2) _____ / _____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____
3) _____ / _____ / _____	_____ / _____	_____ / _____	_____ / _____	_____ / _____

Does your child have an allergy, medical, disability or learning problem for us to be aware of? Yes No
If yes, Please explain _____

IN CASE OF EMERGENCY WHEN PARENT CANNOT BE REACHED CALL:

Name _____ Phone _____

Address _____ Relationship to child _____

SESSION ATTENDING: (Please circle the one(s) your child(ren) will be attending)

Sunday Morning: **grades 1-3 only:** 9:30am-10:30am (children will be dismissed from 9:30 Mass)

Saturday Morning: **grades 1-8:** 9-10:15am

Sunday Morning **grades 9-10:** 10:35am-12pm

Intergenerational: **all ages:** Sunday 11:30-2:30pm

REGISTRATION FEE: Registration fee for 2021 is \$40 per child.

No child, who cannot afford the fee, will be denied faith formation.

No fee required for children of catechist/teacher.

Enclosed please find \$ _____. If not, please call to make arrangements to pay.
Please make check payable to **St. John the Baptist** and return it with this registration form to:
St. John's 168 Chestnut St. Lockport, NY 14094

VOLUNTEER PARTICIPATION:

Sunday Morning Catechist: Grade 1 _____ Grade 2 _____ Grade 3 _____

Catechist/Teacher (grade level) _____ Day/ Time: _____

Substitute (grade level) _____ Day/ Time: _____

Site Supervisor (during class) _____ Day/ Time: _____

PHOTOGRAPHY PERMISSION: I give my permission for St. John's Faith Formation/Parish to use photographs of my child(ren) or family on the parish website, social media page and/or parish publications. _____ Yes _____ No

Please fill out the information below for children entering 1st or 2nd grade or

new children (in any grade) registering for the first time in the program

Father's Name _____ Mother's Name (Maiden Name) _____

Child _____ Date of Birth _____

Date of Baptism _____

Church of Baptism _____ City _____ State _____

Child _____ Date of Birth _____

Date of Baptism _____

Church of Baptism _____ City _____ State _____

Child _____ Date of Birth _____

Date of Baptism _____

Church of Baptism _____ City _____ State _____