2019-2020
Shepherd of Souls
A Family of Faith Registration Form

FAMILY NAME _____ HOME PHONE _____

MAILING ADDRESS _____

_____

MOTHER'S NAME _____ CELL PHONE _____

FATHER'S NAME _____ CELL PHONE _____

EMERGENCY CONTACT NAME _____ PHONE _____

E-MAIL ADDRESS _____

Special learning needs: _____
(All information will be kept confidential and will be shared only with your child's teacher.)

REGISTERED MEMBER OF

- ☐ St. Johns
- ☐ St. Philip's
- ☐ Our Lady
- ☐ Not Registered

SACRAMENTS
Please check those already received

CHILD'S NAME (First & Last if differs from parent)	Gender (M/F)	BIRTHDATE	GRADE 2019-2020	BAPTISM	RECONCILIATION	EUCHARIST	CONFIRMATION	ALLERGIES/MEDICAL CONDITIONS (Please list details on back if applicable)
		___/___/___						YES/NO
		___/___/___						YES/NO
		___/___/___						YES/NO
		___/___/___						YES/NO
		___/___/___						YES/NO
		___/___/___						YES/NO

☐ My Children Grades 4-11 will participate in supplemental Wednesday programming

☐ My Children Preschool - Grade 3 will participate in Sunday School

☐ FAMILY FEE: $75 per family
(Fee waved for Catechists)

SCHOLARSHIPS ARE AVAILABLE FOR THOSE WITH FINANCIAL NEED

Unless you notify the parish, the Church of St. Philip assumes permission to use your child's photograph for print and electronic communications and publicity. This includes attendance at retreats, faith formation sessions and church sponsored social functions.