



St. Martin of Tours 2018-2019 Christian Formation Registration

Office Use Only:
Date Recvd: _____
Total Children: _____
Sacramental Prep: _____
Total Payment: _____
Cash _____
Check# _____

**Religious Education classes meet Monday nights as indicated on the yearly
calendar from 6:15—7:30 pm**

Parent Information:

Family Last Name _____ Parents First Names _____ and _____

Child/ren primarily live with Mom: _____ Dad: _____ Both: _____

Home Address _____ City _____ State ____ Zip Code _____

Preferred Email _____ Secondary Email _____

Home Phone _____

Moms Cell phone _____ Dads Cell phone _____

Emergency Contact Name _____ Relationship _____ Phone Number _____

Are you a parish member? Please circle: **YES** or **NO**

Please Mark if applicable: I am a Catechist for the year I am a classroom helper for the year
 I am the office helper * Check box means one (non sacramental) student will receive free tuition for the year

We need your time and talent! Contact Michelle Kreuser at the parish office if you are willing to volunteer!

2018-2019 Fee Schedule
\$110 per Registered Student \$165 per student preparing for sacraments
Family Discount available for 3 or more registered students of \$300 (plus sacramental fees if applicable)
Payments is due on or before September 17th!
Tuition Assistance available for those who qualify. Contact Michelle Kreuser for information

Release: I give permission to St. Martin of Tours to photograph my child for program purposes while participating in activities pertaining to St. Martin of Tours. I hold St. Martin of Tours free and clear of any claim on my part.

I give permission I do *not* give permission

Parent Signature _____ Date _____

The Christian Formation program is the structured teaching of our faith, however, parents are the primary teachers of the Catholic Faith. By enrolling my child in the Religious Education program at St. Martin of Tours, I realize that it is my responsibility to work with the catechists to help enrich my child's faith formation and to participate in our faith while at home.

Parent Signature _____ Date _____

For Questions please contact Michelle Kreuser at the parish office: 414-209-7684



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Embrace Joy!



Family Information:

Family Last Name _____ Parents First Name _____ and _____

Home Address _____ City _____ State ____ Zip Code _____

| CHILD FIRST NAME <small>(add last name only if different)</small> | Grade In Fall 2018 | School Attending | Date of Birth | Church of Baptism | Sacraments Received Please Circle |
|--|--------------------------|------------------|------------------|----------------------|---|
| 1. | | | | | Baptism Reconciliation Eucharist |
| 2. | | | | | Baptism Reconciliation Eucharist |
| 3. | | | | | Baptism Reconciliation Eucharist |

Briefly, please tell us about each of the children listed above

Describe any special needs (confidential), health problems (confidential) or any allergies

VOLUNTEERS NEEDED!!

We have a variety of volunteer positions that need to be filled in order to run a smooth school year including those listed below.

Please also indicate something you maybe interested in that is not listed.

Classroom Teacher

Classroom helper

Hall Monitor

Liturgy of the Word Leader

Substitute Teacher

Other: _____

Please return this form to the parish office on or before September 17th

St. Martin of Tours Parish Attn: Michelle Kreuser

7963 South 116th Street Franklin WI 53132