

***HOLY FAMILY AREA FAITH FORMATION
2025-2026 REGISTRATION FORM
Churches of St. Andrew, St. James & St. Joseph***

Family Last Name _____

Mailing Address _____

Home Phone Number _____

Child(ren) live with: ☐ both parents ☐ Mother only ☐ Father only ☐ Guardian ☐ Other _____

****Please let us know the best way to reach you.** ☐ E-mail ☐ Text ☐ Phone

****Please let us know the best language to mail information.** ☐ English ☐ Spanish ☐ Bilingual

Father's Name _____

Religion _____

Work Number _____

Cell Number _____ Text ☐ Yes ☐ No

E-mail _____

Mother's Name _____

Religion _____

Work Number _____

Cell Number _____ Text ☐ Yes ☐ No

E-Mail _____

STUDENT INFORMATION

List all children in Grades K-11 (from youngest to oldest)

First & Last Name _____

Birthday _____

Gender ☐ Male ☐ Female

Grade (Fall 2025) _____

School Attending _____

Has this child received:

Baptism ? ☐ Yes ☐ No

First Reconciliation ? ☐ Yes ☐ No

First Communion ? ☐ Yes ☐ No

Allergies/Special Concerns _____

FOR OFFICE USE ONLY

Date rec'd _____

Amount _____

Check# ☐ Cash ☐ Online ☐

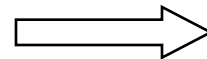
****Please list any younger children living in your home and their birth dates (Birth -Grade K)**

First & Last Name _____
Birthday _____
Gender ☐ Male ☐ Female
Grade (Fall 2025) _____
School Attending _____
Has this child received:
Baptism ? ☐ Yes ☐ No
First Reconciliation ? ☐ Yes ☐ No
First Communion ? ☐ Yes ☐ No
Allergies/Special Concerns _____

First & Last Name _____
Birthday _____
Gender ☐ Male ☐ Female
Grade (Fall 2025) _____
School Attending _____
Has this child received:
Baptism ? ☐ Yes ☐ No
First Reconciliation ? ☐ Yes ☐ No
First Communion ? ☐ Yes ☐ No
Allergies/Special Concerns _____

First & Last Name _____
Birthday _____
Gender ☐ Male ☐ Female
Grade (Fall 2025) _____
School Attending _____
Has this child received:
Baptism ? ☐ Yes ☐ No
First Reconciliation ? ☐ Yes ☐ No
First Communion ? ☐ Yes ☐ No
Allergies/Special Concerns _____

PLEASE COMPLETE BACKSIDE



Parish in which you are registered: _____

My children will attend classes at: ☐ **St. Andrew:** __ Grade K-9 (at St. Andrew) __ Grade 10-12 (at St. Joseph)
☐ **St. James:** __ Grade 1-9 (at St. James) __ Grade 10-12 (at St. Joseph)
☐ **St. Joseph:** __ Grade 1-8 Wed; __ Grade 9-12 (Sun eve)

Emergency Contact: _____
(name) (phone number)

***CGS REGISTRATION WILL ONLY BE COMPLETED ONLINE-Paper registrations for CGS will not be accepted. Please contact Alisha Schindler if unable to complete online.**

VOLUNTEERISM

We rely greatly on volunteers to make our Faith Formation Program a successful one. Please indicate an area in which you might be able to help us.

- ☐ Catechist – (Catechist will receive Free Faith Formation Registration Fee)
- ☐ Substitute Catechist ☐ Bake Bars, cookies ☐ Fundraiser help
- ☐ Classroom Aide ☐ Help Prepare/Serve Special Meals

☐ Office Helper

☐ Prayer Partner

☐ Other: _____

(All volunteers must be in full compliance with the Diocese of New Ulm Guidelines for the Protection of Children and Youth before they can work with children.)

PHOTO/VIDEO RELEASE FORM FOR 2025-2026 YEAR

I hereby give permission for my child(ren) (name them) _____
to be photographed or videotaped by the Holy Family Area Faith Community. I realize that the photo may be published in the newspaper or website. The video may be used for educational or informational purposes regarding the programs or curriculum with the Holy Family Area Faith Community.

Signed _____ Date _____

REGISTRATION FEES

REGISTER BY SEPTEMBER 1, 2025:

1 child - \$35.00; 2 children - \$70.00

3 children or more - \$80.00

LATE REGISTRATION (after 9/01/25):

1 child - \$40.00; 2 children - \$80.00;

3 children or more - \$100.00

PLEASE MAKE CHECKS PAYABLE TO YOUR PARISH