

**St. Roman & St. Charles Borromeo  
Collaborative Catholic Youth Formation Program  
2021-2022**

**First Reconciliation & First Communion  
Registration Form**

St. Roman Parish  
1710 W. Bolivar Ave.  
Milwaukee, WI 53221

St. Charles Borromeo  
5571 S. Marilyn St.  
Milwaukee, WI 53221

**Parish member of:**  St. Charles Borromeo  St. Roman  Other:

**Date:** \_\_\_\_\_

**STUDENT INFORMATION**

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Please check one:  Male  Female Date of Birth: \_\_\_\_\_

School Attending: \_\_\_\_\_ Grade as of 9/1/21: \_\_\_\_\_

Baptism:  Yes  No Church of Baptism: \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**Father's First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell (Father):** \_\_\_\_\_ **E-mail (Father):** \_\_\_\_\_

**Mother's First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_ **Religion:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Cell (Mother):** \_\_\_\_\_ **E-mail (Mother):** \_\_\_\_\_

**Student resides with:**  Both parents  Mother only  Father only  Both parents (Separate Homes) **\*Please list separate addresses under Parent/Guradian Information**

**Send mail to:**  Both parents  Mother only  Father only  Both parents (Separate Homes)

**Language spoken at home:**  English  Spanish  Other: \_\_\_\_\_



## SACRAMENTAL PROGRAM FEES

Registration Fee	\$115.00
Sacramental Preparation Fee	\$100.00
<b>Total</b>	<b>\$215.00</b>

### ADDITIONAL NOTES:

- A non-refundable deposit of \$25.00 per student is due upon registration. This deposit will be credited towards the total tuition. Please make checks payable to St Roman Parish.
- These fees help pay for the workbooks, certificates, retreats and other materials needed in preparing for these Sacraments.
- All registrations must include a copy of the student's **baptismal certificate**.
- **Please Note:** Students preparing for First Reconciliation and First Communion **MUST** have completed their first-grade year, or any year above, in a **catholic** school or a **catholic** religious education program. Meaning this would be their second year, or more, of religious education; a requirement by the Archdiocese.

### CONFIDENTIAL INFORMATION

The purpose of gathering this information is in the event of needing to be sensitive towards your family and your child/ren.

Parent's Marital Status:    Married       Separated       Divorced       Single       Widowed

**Are there any physical, sensory, emotional, learning disabilities, or any other special needs?**

Student Name: \_\_\_\_\_ Please List: \_\_\_\_\_

**Are there any medications or medical conditions such as allergies, diabetic needs, or Epi-Pen?**

Student Name: \_\_\_\_\_ Please List: \_\_\_\_\_

### SIGNATURE OF PARENT OR GUARDIAN

**Signature** \_\_\_\_\_

**Date:** \_\_\_\_\_

### FOR OFFICE USE ONLY

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

RCIA Candidate:       Yes       No      Date: \_\_\_\_\_

Sacrament Needed:  Baptism    Communion    Reconciliation    Confirmation      Date: \_\_\_\_\_

Copy of Baptismal Certificate on file at CYF office: \_\_\_\_\_ Date: \_\_\_\_\_

AMOUNT REC'D	CASH/CHECK	DATE	BALANCE