2018 Summer Class Registration Form
Initiating or Resuming Catechesis

St. John Bosco Faith Formation Office | 105 Leetes Island Rd, Branford CT 06405 | 203-488-2998
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FAMILY INFORMATION

***Family Name*:** _____

Mother / Guardian

Name: _____ Maiden Name: _____

Address: _____

Phone Number: *HOME*: _____ *WORK*: _____ *CELL*: _____

Email: _____

Father / Guardian

Name: _____

Address: _____

Phone Number: *HOME*: _____ *WORK*: _____ *CELL*: _____

Email: _____

Child(ren) reside with: *BOTH PARENTS* _____ *MOTHER* _____ *FATHER* _____ *GUARDIAN* _____

Emergency Contact:

Name: _____ Phone: _____ Relationship: _____

STUDENT INFORMATION

First Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (*as of September 2018*): _____

What services does your child receive at school? _____

In what grades has your child regularly attended faith formation classes? _____

_____

Baptism: *CHURCH*: _____ *CITY/STATE*: _____ *DATE*: _____

First Communion: *CHURCH*: _____ *CITY/STATE*: _____ *DATE*: _____

Food Restrictions / Allergies: _____

Second Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (as of September 2018):_____

What services does your child receive at school? _____

In what grades has your child regularly attended faith formation classes?_____

_____

Baptism: CHURCH: _____ CITY/STATE: _____ DATE: _____

First Communion: CHURCH: _____ CITY/STATE: _____ DATE: _____

Food Restrictions / Allergies: _____

Third Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (as of September 2018):_____

What services does your child receive at school? _____

In what grades has your child regularly attended faith formation classes?_____

_____

Baptism: CHURCH: _____ CITY/STATE: _____ DATE: _____

First Communion: CHURCH: _____ CITY/STATE: _____ DATE: _____

Food Restrictions / Allergies: _____

REGISTRATION & PROGRAM FEE

The registration deadline for summer classes is **Sunday, May 20, 2018**. At the time of registration, the program fee of $50 per child is due. Payment may be done by cash, or by check made payable to *St. John Bosco Parish*.

As no child should be denied religious education due to an inability to pay, we ask that parents write a letter to the Faith Formation Coordinator to request scholarship assistance if this fee presents a legitimate and serious hardship for your family. Attach the request to the registration form.

SIGNATURE

By signing this Registration Form:

- I certify that the above information is true.
- I agree to cooperate with the policies of the St. John Bosco Parish Faith Formation Program.

_____ _____

Signature of Mother / Father / Guardian *Date*