



2018 - 2019 Faith Formation Registration Form

St. John Bosco Faith Formation Office | 105 Leetes Island Rd, Branford CT 06405 | 203-488-2998
faithformation@saintjohnboscobranford.org | www.saintjohnboscobranford.org

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: _____

Can your child(ren) be photographed for social media? Yes No Please initial here: _____

FAITH FORMATION CLASS TIMES

Below you will find the class times for the 2018 - 2019 Faith Formation year. Based on this schedule, please indicate the preferred class period for each of your children, if applicable.

Grades Pre-K through 4: Monday, 5:00-6:00 PM | Tuesday, 5:00-6:00 PM | Thursday, 5:00-6:00 PM Classes meet weekly.
Saint Therese Hall Saint Therese Hall Saint Mary Hall

Grades 5 – 8: Sunday, 6:30-8:00 PM | Monday, 6:30-8:00 PM | Tuesday, 6:30-8:00 PM Classes meet once per month.
Saint Mary Hall Saint Therese Hall Saint Therese Hall

First Year Confirmation (9th Grade): Sunday, 5:00 – 7:30 PM Saint Mary Hall Classes meet once per month.

Second Year Confirmation (10th Grade): Sunday, 5:00 – 7:30 PM Saint Mary Hall Classes meet once per month.

NAME OF STUDENT	AGE	GRADE	PREFERED CLASS DAY
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

STUDENT INFORMATION

First Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (as of Sep. 2018): _____

Please list any special needs your child may have: _____

Food Restrictions / Allergies: _____

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

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

Second Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (as of Sep. 2018): _____

Please list any special needs your child may have: _____

Food Restrictions / Allergies: _____

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

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

Third Student

Name: _____ Place of Birth: _____

Birthdate: _____ School: _____ Grade (as of Sep. 2018): _____

Please list any special needs your child may have: _____

Food Restrictions / Allergies: _____

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

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

By signing this Registration Form:

- I certify that the above information is true.
- I agree to nurture the spiritual development of my family through the celebration of weekly Mass.
- I agree to cooperate with the policies of the St. John Bosco Parish Faith Formation Program.
- I will submit my child(ren)'s Baptismal Certificate with this form, if I have not done so in a previous year.

Signature of Mother / Father / Guardian

Date

REGISTRATION & PROGRAM FEE

At the time of registration, the annual Program Fee must be paid. Payment may be made in cash, or by check made payable to St. John Bosco Parish.

- For Grades Pre-K – 10, the fee is **\$75 per child** or a **maximum of \$200 per family**.
- For Gr. 3 (Year 3), the Sacramental Preparation Fee is an additional \$25 per student.
- For Confirmation Grades 9 **and** 10, the Sacramental Preparation Fee is an additional \$50 per student per year.

Please call the Coordinator of Faith Formation if you would like to make your payments in monthly installments; arrangements must be made with the Coordinator on an individual basis. If the fee presents legitimate and serious hardship for your family, please write a brief letter to the Coordinator to request scholarship assistance and attach the request to this form.

Office Use Only:

Date: _____ Amount Paid: _____ Check: _____ Sacrament Verification: Yes No Catechist: Yes No