**ST. BASIL / ST. VERONICA FAITH FORMATION PROGRAM**

**STUDENT REGISTRATION FORM**

**2019 – 2020**

TODAY’S DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CHILD’S LAST NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PARENT’S LAST NAME (if different)

ADDRESS:

CITY: ZIP CODE:

HOME PHONE: PARENT’S CELL PHONE:

ADDRESS MAIL TO: ( ) Mr. & Mrs. ( )Mr. ( )Mrs. ( )Ms. ( ) other:

PARENT’S E MAIL:

BEST WAY TO CONTACT: Home phone Cell phone Text Email

HOME PARISH: ST. BASIL\_\_\_\_\_ ST.VERONICA Envelope # \_\_\_\_\_ OTHER (Name)

**FATHER:** (background info.) **MOTHER: (**background info.)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name:

Maiden:

Religion: Religion:

Occupation: Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employer: Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work phone: Work Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address if different from child’s:

 Name Address

 City Zip

MARITAL STATUS: ( ) Married ( ) Divorced ( ) Separated ( ) Widow / Widower ( ) Single

CHILD LIVES WITH: ( ) Mother & Father ( ) Mother ( ) Father ( ) Mother & Stepfather

 ( ) Father & Stepmother ( ) other:

# IS THERE ANYONE TO WHOM YOUR CHILD SHOULD NOT BE RELEASED?

# EMERGENCY CONTACT (not a parent) NAME:

RELATIONSHIP TO CHILD: PHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CHILDREN WHO WILL BE ATTENDING RELIGIOUS EDUCATION SESSIONS:** Please use one column per child

|  |  |  |  |
| --- | --- | --- | --- |
| Full baptismal Name |  |  |  |
| Nick name / preferred name |  |  |  |
| Date of Birth |  |  |  |
| Name of Day School |  |  |  |
| School District/City |  |  |  |
| Grade in Day School |  |  |  |
| Religious Ed. Grade Level |  |  |  |
| Previous Religious Education levels completed |  |  |  |
| At what Parish? |  |  |  |
| Is child Baptized? |  |  |  |
| Church of Baptism |  |  |  |
| Received 1st Communion? |  |  |  |
| Church of 1st Communion |  |  |  |
| Received Confirmation? |  |  |  |
| Church of Confirmation |  |  |  |

I would like to help as a: Catechist Classroom aide Substitute Catechist Office Helper

**REGISTRATION FEE:** PAYMENT IN FULL IS REQUESTED WITH REGISTRATION.

 $20 PER CHILD **MUST ACCOMPANY REGISTRATION FORM IF NOT PAYING IN FULL.**

TUITION AND FEES MUST BE **PAID IN FULL BY SEPTEMBER 27, 2019**

 (unless payment arrangements have been made with the Faith Formation Office)

**TUITION:** $80 per FAMILY

**BOOK/ MATERIALS FEE:** $20 per CHILD

**SACRAMENT FEE:**  $30 per CHILD: Confirmation candidates and First Communion candidates only

**TOTAL:** 1 CHILD: $100 2 CHILDREN: $120 3 CHILDREN: $140 4 CHILDREN: $160

add $30 for each child celebrating First Communion or Confirmation

**NOTE:** A BAPTISMAL RECORD MUST ACCOMPANY ALL NEW REGISTRATIONS

**For Office use only**

**Total Charges:**

Payment Date: Cash Ck # To Amt. Bal. \_\_\_\_\_\_\_

Payment Date: Cash Ck # To Amt. Bal. \_\_\_\_\_\_\_

Payment Date: Cash Ck # To Amt. Bal. \_\_\_\_\_\_\_