

FAITH FORMATION REGISTRATION
St. Vincent de Paul Church
2013 – 2014

STUDENT NAME _____ DATE OF BIRTH _____ Grade in 2013/2014 _____
ADDRESS _____ CITY _____ ZIP _____
MOTHER _____ Mom's Work # _____ Mom/Dad's cell # _____
FATHER _____ Dad's Work # _____ Home Phone # _____
Dad's Email _____ Mom's Email _____

PRE-SCHOOL CLASSES

Sunday Mornings during 10:00am Mass
for 3, 4 & 5 yr. olds **(must be potty trained)**

3 years _____ 4 years _____ 5 years _____

GRADES 1 through 6
Tuesdays from 4:30pm – 5:45pm

GRADE _____

GRADES 7 & 8

Sunday Evenings

7:00pm - 8:30pm GRADE _____

FAMILY FAITH FORMATION PROGRAM - Homestudy

Family Faith Formation is a Homestudy program for grades 1 – 8.
A schedule will be provided. GRADE _____

SACRAMENTAL PREPARATION PROGRAMS

If you feel your child may be ready to begin preparation for one of the following sacraments, please check the appropriate box. Please watch the bulletin for dates and times for readiness meetings.

EUCCHARIST _____ RECONCILIATION _____ CONFIRMATION _____

1. ARE YOU PRESENTLY A REGISTERED PARISHIONER OF ST. VINCENT DE PAUL CHURCH?
___ YES ___ NO

2. To whom (other than you) can your child be released when a program or event is over?

NAME

PHONE #

RELATIONSHIP

Written Permission is necessary when anyone other than a parent picks up a child. Please give a written permission slip to your son or daughter's catechist at the beginning of class.

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Permission Slip

I hereby give my permission for (student's first name) _____ to leave the Church building. The activity is not to exceed beyond the following boundaries (**South** to Railway; **East** to the Bridge; **West** to Park Road, and **North** to the Churchville Elementary School Playground). All other field trips that would go beyond these boundaries or in a vehicle will require advance notification and a signed permission slip from a parent.

Parent Signature

REGISTRATION FEES

(The following fees are for Pre-School through Grade 8 and Home Study)

_____ \$60.00 for one child

_____ \$80.00 for two children

_____ \$15.00 for each additional child

OFFICE USE ONLY

DATE OF REGISTRATION _____

TAKEN BY _____

CASH _____

CHECK # _____

AMOUNT \$ _____