

**2009-2010 PRE-K-5<sup>th</sup> GRADE  
FAITH FORMATION REGISTRATION**

**PARENT/GUARDIAN INFORMATION**

*This information is used to update the Parish Records*

Full Name _____	Full Name _____
Relationship: _____	Relationship: _____
Goes by/Nickname _____	Goes by/Nickname _____
Marital Status:        M   S   D   W	Marital Status:        M   S   D   W
Sacraments Celebrated: check those completed, list Date if known	Sacraments Celebrated: check those completed, list Date if known
Baptism _____        Reconciliation _____	Baptism _____        Reconciliation _____
Eucharist _____        Confirmation _____	Eucharist _____        Confirmation _____
Birth Date _____	Birth Date _____
Religion _____	Religion _____
Occupation _____	Occupation _____
Work Phone _____	Work Phone _____
Cell Phone _____	Cell Phone _____
Your Email _____	Your Email _____

**Family Email** (this is where we will send Faith Formation Info) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone \_\_\_\_\_

We Are Registered Parishioners at:    \_\_\_\_\_ St. John    \_\_\_\_\_ Other (Name) \_\_\_\_\_

**Please fill in your name if interested in volunteering with:**

\_\_\_\_\_ Pre-K-5<sup>th</sup> Grade Sun AM Catechist    \_\_\_\_\_ Pre-K-5<sup>th</sup> Grade Sun AM Class Aide

\_\_\_\_\_ 1<sup>st</sup> – 5<sup>th</sup> Grade Monday PM Catechist    \_\_\_\_\_ 1<sup>st</sup> – 5<sup>th</sup> Grade Monday PM Aide

**EMERGENCY CONTACT FOR FAMILY:** We will always attempt to reach the parent first in case of emergency. If we cannot reach you, please provide an emergency contact.

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship to Student \_\_\_\_\_

**Tuition Rates: Based on the number of students in Elementary Faith Formation & Youth Ministry**

\$75 one Student        \$120 three Students

\$100 two Students        \$140 four or more Students

\*You may submit one check for Elementary Faith Formation & Youth Ministry

For Elementary program or tuition questions, contact Erica May 301-662-8288 ext. 1100

Erica.may@stjohn-frederick.org

Please make your check payable to *St. John the Evangelist*. Return your check with this form to:

**St. John the Evangelist – Faith Formation**

**112 E. Second St.**

**Frederick, MD 21701**

