



# 2010-2011 PRE-K-5<sup>th</sup> GRADE FAITH FORMATION REGISTRATION

## STUDENT INFORMATION & REGISTRATION

Student #1 \_\_\_\_\_ M \_\_\_ F \_\_\_  
Last First Middle

Date of Birth \_\_\_/\_\_\_/\_\_\_ City and State of Birth \_\_\_\_\_  
month day year

Special Needs: \_\_\_\_\_

School Attending – Fall 2010 \_\_\_\_\_ Grade/ Fall 2010 \_\_\_\_\_

Enroll Student for: \_\_\_\_\_ Sunday Morning (grades PK-5) \_\_\_\_\_ Monday Evening (grades 1-5)  
\_\_\_\_\_ Family Faith Formation (grades K-5)

Check below if Sacraments Completed  
\_\_\_\_\_ Baptism  
\_\_\_\_\_ Reconciliation  
\_\_\_\_\_ Eucharist

Check below if preparing for Sacraments this year  
(Sacrament Registration Form Required)  
\_\_\_\_\_ Reconciliation  
\_\_\_\_\_ Eucharist

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Student #2 \_\_\_\_\_ M \_\_\_ F \_\_\_  
Last First Middle

Date of Birth \_\_\_/\_\_\_/\_\_\_ City and State of Birth \_\_\_\_\_  
month day year

Special Needs: \_\_\_\_\_

School Attending – Fall 2010 \_\_\_\_\_ Grade/ Fall 2010 \_\_\_\_\_

Enroll Student for: \_\_\_\_\_ Sunday Morning (grades PK-5) \_\_\_\_\_ Monday Evening (grades 1-5)  
\_\_\_\_\_ Family Faith Formation (grades K-5)

Check below if Sacraments Completed  
\_\_\_\_\_ Baptism  
\_\_\_\_\_ Reconciliation  
\_\_\_\_\_ Eucharist

Check below if preparing for Sacraments this year  
(Sacrament Registration Form Required)  
\_\_\_\_\_ Reconciliation  
\_\_\_\_\_ Eucharist

### Family Life Program

I give permission for my child/ren to participate in the **Family Life Program** Yes \_\_\_\_\_ No \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### PUBLICATION RELEASE

Parents/guardians of participants are advised that photographs or videotape of participants may be used in publications, websites or other materials produced from time to time by the Archdiocese of Baltimore or John the Evangelist Parish. (Participants would not be identified, however, without specific written consent.) Parents/guardians who do not wish their child(ren) to be photographed or filmed should notify the parish in writing. Please note that the parish has no control over the use of photographs or film taken by media that may be covering the event in which your child(ren) participate(s).

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

Over →

**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 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:** In case of emergency, we will always attempt to reach the parent first. Please provide an emergency contact in case we can not reach you.

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 Celeste 301-662-8288 ext. 1100

Celeste.pridemore@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**

**FOR OFFICE USE ONLY**

**PS Updated** \_\_\_\_\_

\$ \_\_\_\_\_ SUN AM        \$ \_\_\_\_\_ MON Elem        \$ \_\_\_\_\_ Family Elem

\$ \_\_\_\_\_ Other \_\_\_\_\_

\$ \_\_\_\_\_ Total Paid    Check # \_\_\_\_\_        Date \_\_\_\_\_        Cash \_\_\_\_\_