Faith Formation Registration Form

Parish:	☐ Churc	ch of The	Holy Family	☐ St. Helena	a's Sch	ool Year:_		
Salutation	n: 🗆 Mr.	& Mrs.	□ Mr. □ 1	Mrs. Miss.	☐ Ms. ☐	l Dr. □ I	Dr. & Mrs.	
Parent(s) Full Name:			Email:					
Home Phone:			Cell Phone:			Other Phone:		
Mailing Address:		Street Apt						
		City		State	Zip)		
Emergency Contact:			Relationship		Phone			
Please print legibly Full Name		Date of Birth	School Name	Age (As of this September	Faith Formation Class (Grade 1-10)	Sacrament(s) to Complete this year (1st Reconciliation, 1st Communion, Confirmation)		
Child 1							·	
Child 2								
Child 3								
Child 4								
Child 5								
Comments:								

This form is not complete without parent/guardian signatures ON BACK

Class Fees: 1

1 Child = \$20

2 Children = \$35

3 or more Children = \$50

Sacramental Fees:

\$10 per Sacrament

33 3 01 111016 (111101611 - 330

For Office Use: _____

Parent/0	Guardian approval to release child(ren) from school for Faith Forn	nation classes:
	rd with Section 3210 (2B) of the State Education Law and the regurequest the release of my child(ren) during regular school time fo	
	Parent/Guardian Signature	Date
o Parent/G	Guardian consent to photo release:	
image and website of posting of who may child (ren without professed for the may do so the sound for the without professed for the website f	ending you this parental consent form to both inform you and to ad personally identifiable information (first name and last initial) to or used for the Catholic Sun or local newspapers. As you are award personally identifiable information on a website since global access such information. These dangers have always existed; how access such information. These dangers have always existed; how and his/her work. We will not release any personally identifiable prior written consent from you as a parent or guardian. Personally ne with last name initial) and photo or images. If you, as the pare so at any time in writing by sending a letter to the Director of Religious will take effect upon receipt by the parish.	to be published on the St Helena's & Holy Family re, there are potential dangers associated with the cess to the Internet does not allow us to control wever, we as a parish do want to celebrate your e information (first name with last name initial) identifiable information includes student(s) names nt or guardian, wish to rescind this agreement, you
Check or	ne of the following choices:	
	I/We GRANT permission for a photo/image that does not include parish website and/or local newspapers.	de my child(ren)'s name to be published on the
	I/We GRANT permission for my child(ren)'s photo/image and na published on the parish website and/or local newspapers	ame (first name with last name initial) to be
	I/We DO NOT GRANT permission for photo/image that includes website and/or local newspapers.	s this/these student(s) to be published on the parish
	Parent/Guardian Signature	 Date