

Seven Dolors Faith Formation Registration Form

School Year 2018-19

Students:

First, Middle, Last Name _____ Grade _____ Medical issues _____

First, Middle, Last Name _____ Grade _____ Medical Issues _____

First, Middle, Last Name _____ Grade _____ Medical Issues _____

First, Middle, Last Name _____ Grade _____ Medical Issues _____

First, Middle, Last Name _____ Grade _____ Medical Issues _____

** medical (allergies, language/learning, any) _____

Parents:

Children live with: _____ both parents _____ mom _____ dad

*please explain _____

Mother's First , Middle, Last Name _____

Address _____

Phone Number _____ Email _____

Father's First, Middle, Last Name _____ same address

Address _____

Phone Number _____ Email _____

Are you registered members of Seven Dolors? yes no, please send me a form to registration

Policy regarding photographs: It is understood that photographs of my child/children may occasionally be taken during Faith Formation class, on field trips or when participations in special events. These photos may be used by teachers for a class project or for display, and may be used on social media. By signing I give permission for this.

Parents Signature _____ Date _____

If you are registering a child for the **first time**, please fill in the following information:

*Students Name, DOB, Baptism/Reconciliation/Communion/Name of Church they were received at for each new student.

*If you are registering a **Second Grader**, please write when and where they were Baptized .

TURN OVER

Faith Investment

| | | |
|--------------------------|--------------------------------|------------------------|
| Sacrament years 2 and 11 | \$85.00 includes retreat price | \$85.00 X ____ = _____ |
| Grades 1, 3-10 | \$45.00 | \$45.00 X ____ = _____ |
| | | Total |

Parents– An Invitation for You:

Is God calling you to grow in your faith? Being involved in our Faith Formation Program may be the opportunity you have been waiting for. Please prayerfully consider if you are being called to become a:

*Catechist

*Catechist's Assistant

*Substitute Catechist

*Guardian Angel (someone to watch the Holy Family entrance as children arrive and leave) Starts about 5:40 to 7:15. This would keep the little one and older ones supervised and allow the Catechist to go directly to the class with the students.

The more volunteers we have, the better our program will become. Excellent resources and support are provided for teaching positions. **All adults who work with children must have a background check and complete the Safe Environment Training videos in accordance with diocesan regulations.**

_____ Yes, I would like to be involved! Please contact me. (Please circle the areas you are interested in)

Emergency Contact Information:

Name: _____ **Phone:** _____

Hospital/Medical Center/Phone Number _____