

FAITH FORMATION

Registration 2018/2019



Student's Legal Name _____

___ Male ___ Female

First

Middle

Last

Birth Date _____ **Age** _____ **Grade in School** _____ **School Name** _____
Month/Day/Year 2018/2019

Sacraments student **has received:** Baptism___ Confirmation___ Eucharist___ Reconciliation___

___ If child is UNBAPTIZED check here

Please Check the Program for this Student

Catechesis of the Good Shepherd

Level I - Ages 3-5 yrs old

- Sunday 10-11:30 a.m.
- Monday 6:15-7:30 p.m.
- Tuesday 6:15-7:30 p.m.

Catechesis of the Good Shepherd

Level II - Ages 6-8 yrs old

- Monday 6:15-7:30 p.m.
- Tuesday 6:15-7:30 p.m.

Finding God Elementary Program

- 4th Grade Tuesday 6:15-7:30 p.m.
- 5th Grade Tuesday 6:15-7:30 p.m.

Youth Ministry

Middle School 6th - 8th Grade

- Tuesday 6:15-7:30 p.m.

High School 9th - 12th Grade

Sunday evening-dates to be determined

- Check Box to be notified

Faith Formation Program enrolled in *last* year:

Parish

Grade Level

Parent Information: (Please inform us of any additional addresses)

Mother's Name: _____ Father's Name: _____

Student's Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone #'s: _____
Mother's Father's

E-mail Addresses: Mother: _____

PLEASE PRINT CLEARLY - We communicate by e-mail.

E-mail Addresses: Father: _____

Emergency Contact (not a parent): _____
Name Phone

Name of Parish where you are registered: _____

Registration fee is **\$15.00** for registered Corpus Christi Parishioners or **\$25.00** for others.

Amount Enclosed \$ _____ **Check #** _____ **Cash Payment Amount \$** _____

Please make checks or money orders payable to **Corpus Christi Parish**

Please fill out other side:
Required Medical Information