

SAINT PETER THE APOSTLE CATHOLIC PARISH

Children's Faith Formation Grades K - 6th (English)

Registration Fee: \$100 per child ✕ Payment is required at time of Registration

Child's full name: First _____ Middle _____ Last _____

Male Female Date of Birth: _____ Grade: (24/25 School Year) _____

Sacraments received: Baptism Reconciliation Eucharist Confirmation (CATHOLIC? Y/ N)

Special Needs:(ALLERGIES, LEARNING/PHYSICAL DISABILITIES, ETC) _____

Only fill this section out if your child is registering for their 2nd year and is preparing for Sacraments*

Needs 1st Reconciliation Yes or No

Needs 1st Eucharist Yes or No

*Must have completed 1 year prior of Faith Formation Classes (CFF) or CFF Home Study program.

Children must be at least 7 years old when they receive Sacraments.

Place of Birth _____ Parish where child was Baptized _____

Submit Birth Certificate and Baptism Certificate at time of registration for Sacrament Preparation students only

Mother/Guardian's full name: _____ Phone # _____

Mailing Address: _____

Father/Guardian's full name: _____ Phone # _____

Mailing Address: (IF DIFFERENT FROM ABOVE) _____

Who does the child live with? Father Mother Both Other _____

Family email address: (PLEASE PROVIDE!) _____

IN CASE OF EMERGENCY AND PARENTS CANNOT BE REACHED, I GIVE PERMISSION FOR STAFF/VOLUNTEERS OF
ST. PETER THE APOSTLE CATHOLIC PARISH TO ADMINISTER BASIC FIRST AID TO THE ABOVE MENTIONED YOUTH
AND TO CONTACT EMERGENCY PERSONNEL FOR FURTHER MEDICAL AID/CARE IF NECESSARY.

Parent/Guardian's Signature: _____ Date: _____