

# Faith Formation Registration Form 2012-2013

Last Name \_\_\_\_\_

Address \_\_\_\_\_ Phone #: \_\_\_\_\_  
\_\_\_\_\_ Zip Code \_\_\_\_\_

Parent's Names \_\_\_\_\_ Cell: \_\_\_\_\_  
\_\_\_\_\_ Cell: \_\_\_\_\_

Email: (please print clearly) \_\_\_\_\_

Additional email for correspondence?: \_\_\_\_\_

Are you registered in the parish? \_\_\_\_\_ Yes \_\_\_\_\_ No

## *Child(ren) who will be participating in the program:*

Full Name	Grade	Age	Birthdate	School
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## *Adults who will be participating in the program:*

Full Name	Religion	Place Employed	Occupation	Work Ph
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Babysitting** is supplied for those adults participating in the adult session). Please list names and ages of those children under 3 requiring babysitting.

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Name: \_\_\_\_\_ Age: \_\_\_\_\_

*Anyone with special needs?* \_\_ Yes \_\_ No If yes, please explain: \_\_\_\_\_

## *Anyone requiring sacramental prep this year?*

Name \_\_\_\_\_ Sacrament: \_\_\_\_\_

Name \_\_\_\_\_ Sacrament: \_\_\_\_\_

Ideas you have for the adult sessions for speakers or topics OR for general faith formation suggestions:

\_\_\_\_\_