

2024-2025 FAITH FORMATION REGISTRATION

Family Name _____

Address _____

City, State, Zip _____

Preferred email for communication _____

Mother's name _____ phone # _____

Email _____

Father's name _____ phone# _____

Email _____

Child 1

Full name _____ nickname _____

Date of birth _____ Grade _____

School attending _____

Sacraments celebrated: Baptism ____ Reconciliation ____ Eucharist ____ Confirmation ____

Health, Dietary, Educational needs: _____ _____ _____

Child 2

Full name _____ nickname _____

Date of birth _____ Grade _____

School attending _____

Sacraments celebrated: Baptism ____ Reconciliation ____ Eucharist ____ Confirmation ____

Health, Dietary, Educational needs: _____ _____ _____

Child 3

Full name _____ nickname _____

Date of birth _____ Grade _____

School attending _____

Sacraments celebrated: Baptism ____ Reconciliation ____ Eucharist ____ Confirmation ____

Health, Dietary, Educational needs: _____ _____ _____

<p>Child/Children live with: Mother ____ Father ____ Both ____</p> <p>Date & place of Baptism for 2nd Graders receiving First Sacraments _____</p> <p align="center">***Please provide a copy of the Baptismal Certificate if receiving Sacraments***</p>

FEES: \$20 per child for all but 2nd grade - \$30 per 2nd grade child (for sacramental supplies)

PAID: CASH _____ CHECK# _____

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The Diocese of Springfield-Cape Girardeau

Please sign this form **ONLY** if you **DO NOT** want your child's photograph/video to be used in diocesan/parish/school materials and campaigns as well as other media initiatives; i.e.: newsletter, websites, fund development efforts, newspapers and television.

2024-2025 Student Exclusion Form

(Denies news media contact for interviews/photos)

At this time, I **do not** want photographs/videos of, _____ to be used without my prior permission. I understand this waiver applies only for the current school year, 2024-2025. I also understand this does not apply to photographs or video images taken at public events.

Signature (Parent / Guardian):

Date: _____