

# REGISTRATION 2010/2011

## Holy Family Faith Formation

### CHILD INFORMATION

Child's Legal Name	_____	_____	_____	_____
	Last	First	Middle/Initial	(Nickname)
Family Name (if different from child's last name)	_____			
Address:	_____			
	Street			
	_____			
	City	State	Zip	
Child's Birth Date:	_____	Birth Place:	_____	
Grade child will enter:	_____	Child is (circle one):	City	State
		Male	Female	

### CHILD'S SACRAMENTAL INFORMATION

**BAPTISM:** Yes No **Name of Baptismal Church:** \_\_\_\_\_

**Address of Baptismal Church:** \_\_\_\_\_



**NOTE: A copy of the baptismal certificate MUST be included in your child's Faith Formation records.**

**Baptismal certificate:** Attached: \_\_\_\_\_ **Already on file:** \_\_\_\_\_

**Other (explain):** \_\_\_\_\_

**PENANCE:** Yes No **Name & Place of Church:** \_\_\_\_\_

**FIRST EUCHARIST:** Yes No **Name & Place of Church:** \_\_\_\_\_

**CONFIRMATION:** Yes No **Name & Place of Church:** \_\_\_\_\_

**MEDICAL PROBLEMS, MEDICATIONS/:** Please specify.

\_\_\_\_\_

**SPECIAL LEARNING NEEDS:** Has your child received prior evaluation for learning disorders or received special education services including counseling, special education placement or ancillary support services? Yes No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

### **EMERGENCY CONTACT INFORMATION**

**Please list two people we can call if you cannot be reached [must be local]**

Contact 1- **Name** \_\_\_\_\_ **Relationship (NOT a parent)** \_\_\_\_\_ **Phone** \_\_\_\_\_

Contact 2 - **Name** \_\_\_\_\_ **Relationship (NOT a parent)** \_\_\_\_\_ **Phone** \_\_\_\_\_

*(continued on reverse side)*

**PARENT INFORMATION**

**Father's Name:** \_\_\_\_\_

First Last

**Mother's Name:** \_\_\_\_\_

First Last Maiden Name

**Status of Parents** (Circle one): Married Single Separated Divorced

**Student resides with** (Circle one): Both parents Mother Father Other

**PLEASE COMPLETE THIS SECTION IF APPLICABLE**

**Primary Custodial Parent:** \_\_\_\_\_

**Does other parent have legal access to child?** Yes No

**Address of non-custodial parent if he/she has access to child:**

\_\_\_\_\_  
**Street Address City State Zip**

**Step-Parent name (if applicable)** \_\_\_\_\_

**Legal Guardian's Name and Relationship to Child:** \_\_\_\_\_

**\*\*\*YOU MUST ATTACH A COPY OF CUSTODY PAPERS\*\*\***

**FATHER**

Phone H: \_\_\_\_\_ O: \_\_\_\_\_ C: \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

**MOTHER**

Phone H: \_\_\_\_\_ O: \_\_\_\_\_ C: \_\_\_\_\_

Occupation: \_\_\_\_\_ Email: \_\_\_\_\_

**Is a second language spoken in home:** No Yes If yes, please specify \_\_\_\_\_

**Religion of Parents** Mother: \_\_\_\_\_ Father: \_\_\_\_\_

**Are you a registered member of Holy Family parish?** Y N If yes: Envelope # \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_

**TODAY'S DATE:** \_\_\_\_\_

**Registration Fee:** \$50 for one child, \$80 for two children, \$105 for three or more children. These fees are to be paid with registration.

**Sacramental Preparation Fee:** First Reconciliation & First Eucharist combined, \$50; Confirmation, \$40; RCIA Adapted for Children & Youth, \$75 per student).

**For Office Use only:** **Child's ID Number** \_\_\_\_\_

**Registration Fee:** Check \_\_\_\_\_ Cash \_\_\_\_\_ Amount \_\_\_\_\_ Date Received \_\_\_\_\_

**Sacramental Fee:** Check \_\_\_\_\_ Cash \_\_\_\_\_ Amount \_\_\_\_\_ Date Received \_\_\_\_\_