Faith Formation Registration 2010-2011

Father

Name: _____
(Last) (First)

Address: _____

_____

Phone: Home: _____
Work: _____
Cell: _____

☐ Please check this box if we can text message above Cell Phone

Registered in Parish: _____
Religion: _____

Mother

Name: _____
(Last) (First) (Maiden)

Address: _____

_____

Phone: Home: _____
Work: _____
Cell: _____

☐ Please check this box if we can text message above Cell Phone

Registered in Parish: _____
Religion: _____

E-Mail Address: _____

☐ Please check this box if e-mail is an effective way of communicating with you

In the event of an emergency, if we cannot be reached, please contact: _____ Phone: _____

If parents are separated, please indicate custodial parent(s): _____ If custodial parent is remarried, please give full name of spouse: _____

Student(s): First, Last Name	Sex (M/F)	Date of Birth	Sacraments Received				School	Grade
			Baptism	Reconciliation	Eucharist	Confirmation		
Special Student Needs: (Learning Disabilities, Special education needs, health or behavioral concerns, allergies, etc.)								

Photo Release

I, _____, give the Church of St. Boniface permission to post pictures of my child/ren listed above on the bulletin board in Fellowship Hall and on www.stboniface-stmary.org. I understand that only pictures taken at official Faith Formation events will be posted.

Parent Signature: _____ Date: _____

Tuition: Members $50 per child
Non-members $75 per child
$150 cap/family

Tuition: Amount paid $ _____
Amount due $ _____