

# St. Paul's Faith Formation

1807 Bedford St, Rome, NY 13440

# Family Registration Form

(Rev. 7/2015)

Please **PRINT** all information clearly. Please sign, date and return this form with your remittance in the envelope provided or mail to the address above.

Mailing name & address of parent/guardian(s) children live with:

Parent/Guardian Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Apt# \_\_\_\_\_

City: \_\_\_\_\_, NY Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Other Phone(s): \_\_\_\_\_

E-mail: \_\_\_\_\_

Please list all children **who will attend** Faith Formation or Sacrament Preparation classes at on the lines below. Include last name of child if different from parent or guardian listed above. Attach a separate sheet if additional space is needed. Please use other side to explain medical conditions or to note any special needs for your child (children). Please note all food allergies.

Name of Child	Date of Birth	Grade	School	Allergies, Medical, Learning or Special Needs

In case of **Emergency** and **parent or guardian cannot be reached**, please list another adult we could contact:

Emergency Contact: Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_  
(Grandparent, neighbor, friend, aunt, uncle, etc.)

- We are members of **St. Paul's** Church.
- We are **not** members of St. Paul's, our home parish is: \_\_\_\_\_
- I give permission to have my child's **photo** (no names or first name only) used on bulletin boards, website, bulletins or newsletters.
- I have read and agree to abide by the rules for classes and safety listed on the reverse side of the Faith Formation Calendar.

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Fees help cover books, materials, supplies, busing, catechist training, retreats, certificates, programs, etc.

Grades K - 10 Registration Fee \$ 45 per child = \$ \_\_\_\_\_  
*Registration Fee is waived for parents or guardians who serve as catechists.*

First Sacraments & Confirmation Retreat Fee \$25 per child = \$ \_\_\_\_\_

**Subtract \$5 if paid by September 10**

**Amount enclosed** (Maximum \$125 due per family): \$ \_\_\_\_\_

**Please make checks payable to St. Paul's Parish**