

**SACRED HEART CATHOLIC PARISH**  
**FAITH FORMATION 2020-2021**

CLASS \_\_\_\_ TIME \_\_\_\_

**STUDENT INFORMATION** (ONE FORM PER CHILD) **PLEASE COMPLETE THIS FORM LEGIBLY!**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

School Grade 2020-2021: \_\_\_\_\_ School Name \_\_\_\_\_ Allergies YES  NO

Did student attend classes at Sacred Heart during 2019-2020 YES  NO  What Class? \_\_\_\_\_

**SACRAMENTS RECEIVED:** Baptism at \_\_\_\_\_ Month and Year \_\_\_\_\_

First Communion at: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation at: \_\_\_\_\_ Date: \_\_\_\_\_

**FAMILY INFORMATION:**

Father's name: \_\_\_\_\_

Cell #: \_\_\_\_\_ (last) \_\_\_\_\_ (first) \_\_\_\_\_  
Home #: \_\_\_\_\_ Email \_\_\_\_\_

Mother's name: \_\_\_\_\_

Cell #: \_\_\_\_\_ (last) \_\_\_\_\_ (first) \_\_\_\_\_  
Home #: \_\_\_\_\_ Email \_\_\_\_\_

Who has custody of children? \_\_\_ Parents \_\_\_ Father \_\_\_ Mother \_\_\_ Legal Guardian

**MARITAL STATUS:** \_\_\_ Married \_\_\_ Married by Church \_\_\_ Single \_\_\_ Separated \_\_\_ Divorced \_\_\_ Other

**ETHNICITY:** \_\_\_ Caucasian \_\_\_ Hispanic \_\_\_ African American \_\_\_ Polynesian \_\_\_ Native American \_\_\_ Asian \_\_\_ Other

**EMERGENCY CONTACT: (*other than parent*)** Please give us the name and number of another local person, if we are unable to reach a parent or legal guardian.

Name: \_\_\_\_\_ Relationship to your child: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Email \_\_\_\_\_

**NOTE: Dear Parent, please give us the CORRECT phone number and email address to be used to send home vital information for your child. Note: IF PHONE NUMBER OR EMAIL SHOULD CHANGE, PLEASE NOTIFY US! IT IS CRITICAL TO HAVE THESE CURRENT!!!!!!!!!!**

Phone number to Call: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ - \_\_\_\_ or (\_\_\_\_) \_\_\_\_ - \_\_\_\_ - \_\_\_\_

E-mail address \_\_\_\_\_

**SACRED HEART CATHOLIC PARISH**  
**FAITH FORMATION 2020-2021**

CLASS \_\_\_\_ TIME \_\_\_\_

**CLASS SCHEDULE: Registration** –Please indicate with a checkmark in the box, the class you are requesting for your child.

**Sunday: English Classes**

<p><b>9:15 AM – 10:25 AM</b></p> <p><input type="checkbox"/> Pre-Kindergarten-3 and 4 year -olds</p> <p><input type="checkbox"/> Kindergarten.</p> <p><input type="checkbox"/> 1<sup>st</sup> Grade (Sacrament Preparation).</p> <p><input type="checkbox"/> 2<sup>nd</sup> Grade (Sacrament Preparation).</p> <p><input type="checkbox"/> 3<sup>rd</sup> Grade Religious Education.</p> <p><input type="checkbox"/> 4<sup>th</sup> Grade Religious Education.</p> <p><input type="checkbox"/> 5<sup>th</sup> Grade Religious Education.</p>	<p><b>11:45 AM – 12:55 PM</b></p> <p><input type="checkbox"/> 1<sup>st</sup> Grade (Sacrament Preparation).</p> <p><input type="checkbox"/> 2<sup>nd</sup> Grade (Sacrament Preparation).</p> <p><input type="checkbox"/> RCIA 1 Adapted for Children/Communion 1 (3,4,5 Grade)</p> <p><input type="checkbox"/> RCIA 2 Adapted for Children /Communion2 (3,4, 5 Grade)</p> <p><input type="checkbox"/> 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup> Grade Religious Education</p> <p><input type="checkbox"/> Special Needs Class for All Grades- Sacrament And Religious Education (Non-sacrament)</p>
<p><b>5:00 PM -6:30 PM</b></p> <p><input type="checkbox"/> 6<sup>th</sup> Grade Religious Education.</p> <p><input type="checkbox"/> 7<sup>th</sup> Grade Confirmation 1. Sacrament Prep.</p> <p><input type="checkbox"/> 8<sup>th</sup> Grade &amp; H.S. Confirmation 2. Sacrament Prep.</p>	<p><b>5:00 PM -6:30 PM</b></p> <p><input type="checkbox"/> RCIA 1 Adapted for Children/Communion 1. (6-12 Grade)</p> <p><input type="checkbox"/> RCIA 2 Adapted for Children/Communion 2. (6-12 Grade)</p>

**Method of payment:**

Cash \_\_\_\_\_ Check Number \_\_\_\_\_ \* there will be a \$25.00 fee for returned checks

Card credit number \_\_\_\_\_ EXP. \_\_\_\_\_

Cardholder's name \_\_\_\_\_

Card billing address \_\_\_\_\_

**SACRED HEART CATHOLIC PARISH**  
**FAITH FORMATION 2020-2021**

CLASS \_\_\_\_ TIME \_\_\_\_

---

**Conditions of registration, waiver, release and consent for the processing of this registration**

I, \_\_\_\_\_, grant permission for my child, \_\_\_\_\_ to participate in the various programs and activities offered by Sacred Heart Catholic Parish as of September 14, 2020 and continuing through September 06, 2021. All activities carried out are under the guidance and direction of employees and volunteers from the Sacred Heart Parish subject to being cleared through our Safe Environment Program set forth by the Diocese of Dallas. I understand that, as the parent and/or legal guardian of the child named above, I remain legally and financially responsible for any personal actions taken by my child. I agree to hold harmless Sacred Heart Catholic Parish and its employees/volunteers of any kind, any claim arising from or in any way connected with the participation and the activities of my child. This disclaimer shall be binding to all interested parties, including but not limited to me and my spouse, my child, any heirs, successors and assigns. In the case any legal action is taken by any party, it has been agreed that the unsuccessful party to such an action must pay all reasonable costs of counsel fees and expenses incurred by the prevailing party. I understand that my child can be photographed during these activities and these photos and videos can be used in promotional materials, <http://www.sacredheartrowlett.org> (website) and the Sacred Heart Social Media.

I understand that the Sacred Heart Catholic Parish is not responsible for articles lost or broken and that the unclaimed items will be donated to charity.

Parent/Guardian Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# PARENTAL COMMITMENT

Please read below very carefully before signing

I understand that sacramental preparation is for a way of life, and not for a single event and that it is most effective when a sacramental life is modeled in the family.

- ❖ I am willing to make the commitment to participate in the weekly Sunday parent faith formation program in addition to bringing my child to all required classes.
- ❖ I am prepared to attend ALL THE FAMILY CLASSES and *AGREE TO PRIORITIZE FAITH FORMATION CLASSES, RETREATS and SACRAMENTAL REHEARSALS ahead of sport practices and games, extra-curricular school activities, etc.*
- ❖ I realize that failure to support my child's preparation in the home or EXCESSIVE ABSENCES from class (as determined by the program director) COULD RESULT IN DELAY OF THE SACRAMENT UNTIL A LATER TIME.

PARENT/ GUARDIAN SIGNATURE: \_\_\_\_\_

Date: \_\_\_\_\_

Faith Formation Office  
nhampton@sacredheartrowlett.org  
972 475-4405 Ext. 18 & 21

**SACRED HEART CATHOLIC PARISH**  
**FAITH FORMATION 2020-2021**

CLASS \_\_\_\_ TIME \_\_\_\_

**GENERAL STATUS AND NEEDS**

Has your child been officially diagnosed with any medical genetic, cognitive, development, or communication conditions or disorders that will impact his or her ability to learn or to participate in classroom activities or Mass? Yes  No

If yes, please

describe \_\_\_\_\_

If your child receives special education services at school, which type of classroom does he or she participate in? This will help us plan your child's religious education classroom needs. Please check all that apply.

- General Education Classroom all the time       General Education Classroom Part of the time  
 Resource Room Some of the Time       Separate Classroom for students with Disabilities       Has a Classroom Aide

**Communications:**

In terms of communication, how would you describe the following as they relate to your child?

Language(s) Spoken at Home: \_\_\_\_\_

**Speech:**  Gestures     Meaningful sounds     Words     Phrases Sentences     Sign Language

**Communication Devices Used:** \_\_\_\_\_

**Language Comprehension:**  Understands all the time     Understands most of the time

Understands some of the time     Recognized voices of family members or other significant individuals.

**Does your child read?**  Yes     No    If Yes, at what approximate grade level? \_\_\_\_\_

**Eating:**

Special Dietary Requirements: \_\_\_\_\_

Food Allergies \_\_\_\_\_

Does your child receive a Low-Gluten Host?  Yes     No

Does your Child only receive Precious Blood?  Yes     No

In terms of practicing and living the Catholic Faith, what are your greatest hopes for your child?

If anything, what might your child or family need to feel totally welcomed and included at Mass or in parish?

SACRED HEART CATHOLIC PARISH  
FAITH FORMATION 2020-2021

CLASS \_\_\_\_ TIME \_\_\_\_

---