

St. Mary's Faith Formation Registration Form

Grades 1-8

2020-2021

Due to Covid I will not be sending my child/ren to onsite Faith Formation, but would like to do it from home.

Student Name	Grade 2020-21 School Year	Birthdate

Parent or Guardian/Emergency Contact	Phone	email

Any health related concerns?(such as allergies) _____

To help cover cost of materials, a registration fee of \$35 is requested, with a \$70 cap for families. NO child will be denied a religious education. If you would like to discuss scholarships or payment options please contact Rachel Raths. Students will be taught according to the Catechism of the Catholic Church through the Loyola Press curriculum titled *Finding God*, the Dynamic Catholic series *Blessed*, the Holy Bible and/or other religious texts.

Students will also participate in a Diocesan-wide safe environment program called "Circle of Grace".

Parents will support the teachings of the Faith to the best of their abilities through weekly Mass, volunteering at least 3 hours time to St. Mary's in any capacity, and engaging in family prayer.

***Please be advised that your child may be photographed or video recorded during Faith Formation or Faith Formation events (including but not limited to sacraments, parties, Masses, etc).

I, _____, give permission to St. Mary's of the Lake Catholic Church to use images of my child(ren), including but not limited to the St. Mary's of the Lake Facebook page, website and local newspapers.

Signature

Date

*****New Students and SECOND GRADE STUDENTS*****

Name _____

Baptized? Y or N Date _____ Church _____

Reconciliation? Y or N Date _____ Church _____

Eucharist? Y or N Date _____ Church _____

Name _____

Baptized? Y or N Date _____ Church _____

Reconciliation? Y or N Date _____ Church _____

Eucharist? Y or N Date _____ Church _____

Name _____

Baptized? Y or N Date _____ Church _____

Reconciliation? Y or N Date _____ Church _____

Eucharist? Y or N Date _____ Church _____

Name _____

Baptized? Y or N Date _____ Church _____

Reconciliation? Y or N Date _____ Church _____

Eucharist? Y or N Date _____ Church _____

****If sacraments were received anywhere other than St. Mary's, please provide a copy of the certificate for our records.**