

Faith Formation Registration: St. Ann's, Our Lady of Hope & St. Mary's Parishes

Family Name: _____ **Father:** _____ **Mother:** _____ **Guardian:** _____

Mailing Address: _____ **City:** _____ **Zip Code:** _____

Email: _____ **Home Phone:** _____ **Cell Phone:** _____

(to be used for emergency contact)

Emergency Contact Name: _____ **Emergency Phone Number:** _____

Where will you attend: **St. Ann's, Fort Ann** **Our Lady of Hope, Whitehall** **St. Mary's, Granville**

Student Name Last, First MI	DOB XX/XX/XX	Circle One	Current Grade	Sacramental Certificates		Allergy/ Restrictions (Use extra paper if necessary)
				<input type="checkbox"/> St. Ann's <input type="checkbox"/> OLH <input type="checkbox"/> St. Mary's	Copies Required From Other Churches	
		M/F		<input type="checkbox"/> Baptism <input type="checkbox"/> First Communion	<input type="checkbox"/> Baptism—Copy Attached <input type="checkbox"/> First Communion—Copy Attached	
		M/F		<input type="checkbox"/> Baptism <input type="checkbox"/> First Communion	<input type="checkbox"/> Baptism—Copy Attached <input type="checkbox"/> First Communion—Copy Attached	
		M/F		<input type="checkbox"/> Baptism <input type="checkbox"/> First Communion	<input type="checkbox"/> Baptism—Copy Attached <input type="checkbox"/> First Communion—Copy Attached	

Sacrament certificates required if not previously provided. If performed at St. Ann's, Our Lady of Hope or St. Mary's, the certificates are on file.

I, _____, give my permission to have pictures of all family members used in promotional materials for Faith Formation throughout the year.

All of the above information is current and accurate. **Signature:** _____ **Date:** _____

*Please submit payment of the annual fee of \$25 per child (up to \$50 maximum).
This is a small fraction of our actual costs for faith formation. If you need financial assistance, please contact our office at 518-499-1656.*

Thank you & God Bless you!

For Office Use Only – DO NOT COMPLETE

Amount: \$ _____ Cash or Ck#: _____ Receipt #: _____ Date: _____