

# Co-Cathedral of the Sacred Heart

## 2020-2021 Faith Formation Registration Form

(Complete a form for each Child/Youth)

The Faith Formation Program/Process at the Co-Cathedral is a Parent/Parish Partnership, following the Church's teaching that parents are the primary educators of their children.

**After registering parents will be emailed the dates for the orientation session.**

*Except for Family Connect Sundays, Faith Formation sessions will be online until further notice.*

Student's Name \_\_\_\_\_ Grade 2020/2021: \_\_\_\_\_  
(last) (first) (middle)

Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (city) (zip)

School: \_\_\_\_\_ Public School District \_\_\_\_\_

Known allergies or conditions we should be aware of: \_\_\_\_\_

Father/Guardian \_\_\_\_\_ Mother/Guardian \_\_\_\_\_

Cell Phone \_\_\_\_\_ Text? Y / N Cell Phone \_\_\_\_\_ Text? Y / N

Religion \_\_\_\_\_ Religion \_\_\_\_\_

Child lives with \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Other \_\_\_\_\_

Primary family email (Please print legibly) \_\_\_\_\_

Emergency contact if parent/guardian cannot be reached \_\_\_\_\_

Phone \_\_\_\_\_ relationship to the child \_\_\_\_\_

Our family regularly attends weekly Mass at the Co-Cathedral on: (circle one)

**Saturday: 5PM 7PM Sunday: 7AM 9AM 11AM 1PM 5:30PM 7:30PM**

Our family does not attend Mass at the Co-Cathedral we attend the \_\_\_\_\_ Mass at

\_\_\_\_\_ Church.

### Sacraments the child has received:

Baptism: \_\_\_ Date: \_\_\_\_\_ Church/City/State \_\_\_\_\_

1st Reconciliation \_\_\_ Date: \_\_\_\_\_ Church/City/State \_\_\_\_\_

1st Eucharist \_\_\_ Date: \_\_\_\_\_ Church/City/State \_\_\_\_\_

Confirmation: \_\_\_ Date: \_\_\_\_\_ Church/City/State: \_\_\_\_\_

**I understand that participation in the Children's/Youth Faith Formation program will require my active participation in my child's Faith Formation Process.**

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

# VIDEO/PHOTOGRAPHY CONSENT

As a parent/guardian, I understand that pictures and videos (individual and group) may be taken during Faith Formation sessions.

\_\_\_\_\_ I give permission for my son's/daughter's picture to be used for promoting the Faith Formation program or events.

\_\_\_\_\_ I **DO NOT** give permission for my son's/daughter's picture to be used for promoting the Faith Formation program or events.

\_\_\_\_\_  
Signature (parent/guardian) (date)

## Registration Fees

**Faith Formation/Music Appreciation** text/materials program fee: \$75 per child K-12  
(maximum \$250 per family)

**I understand that all fees are due at registration and that my child will not be considered registered for Faith Formation until all fees are paid, or arrangements have been made to pay the fees on a payment plan.**

\_\_\_\_\_  
Signature (parent or guardian) Date

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### Office Use Only:

Registered Parishioner? Yes / No If yes, Contribution envelope # \_\_\_\_\_

\_\_\_\_\_ Paid in full by Cash or Check \_\_\_\_\_ Receipt #

\_\_\_\_\_ Paying through "Faith Direct" \_\_\_\_\_ Requested Payment Plan

Details of Payment Plan agreed upon: \_\_\_\_\_