

FAITH FORMATION REGISTRATION 2020-2021

Immaculate
Conception

CENTERED AROUND
JESUS CHRIST

Nativity



27528 Patrick St., Madison Lake MN 56063
facebook.com/marysburg

200 Main Street, Cleveland MN 56017
facebook.com/nativitycleveland

I AM A REGISTERED MEMBER OF: _____ MARYSBURG / _____ NATIVITY

*If you are not currently a registered member of either parish, please contact the Parish Office for more information; office@maryschurches.com / Voice Mail 507.243.3166. *All parents must sign a Faith Formation Covid-19 Waiver Form.*

Father's Full Name: *Please Print* _____

Mother's Full Name: _____

Mailing Address: _____

City, ST and ZIP: _____

Primary Phone _____ Secondary Phone _____

Primary EMAIL: _____ Emergency Contact: _____

PLEASE LIST THE CHILDREN YOU ARE REGISTERING, AND CHECK THE SACRAMENTS RECEIVED TO DATE:

NAME <i>(Last name if different from parent/s)</i>	BIRTHDAY	GRADE	BAPTISM (LOCATION)	1ST COMMUNION (LOCATION)
1.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4.			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Due to Covid-19, check the learning options you feel comfortable with: (you can check more than 1)...

REQUIRED

- Distance Learning Only (teachers will provide guidance with the lessons)
- Hybrid Learning (your child would attend every other week to limit the amount of people in the church)
- In Person Learning (all students come on Wednesday evenings for class)

Special Needs - Please check below what may apply to your child...

- Physical or emotional health concern
- Significant life event that affects child's life
- Takes medications on a regular basis
- Diagnosis of ADD or ADHD
- Diagnosis of depression, OCD, panic/anxiety disorder, eating disorder, etc.

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Please note any special concerns that will help us help your child: (i.e. allergies, medications, disabilities, etc.)

Please indicate if you would be willing to help our program (Teacher, substitute, special projects, occasional snacks, etc.)

REGISTERED PARISHIONER COSTS PER STUDENT: All Grades: \$25 ea. _____ Family Max: \$60 ea. _____ Total \$ _____	<i>These fees help cover the cost of books and supplies. However, no family will be denied participation because of financial concerns. If you would like to discuss a fee waiver, or if you have more than 4 children enrolled, please contact us.</i>	<p>We may post photos on the church websites. Please let us know if this is acceptable to you by checking and signing below:</p> <p><input type="checkbox"/> Yes, I give my permission to post images of my child(ren).</p> <p><input type="checkbox"/> No, I do not want pictures of my child(ren) posted on the church website.</p> <p>Signature of Parent or Guardian _____ Dated _____</p>
Enclosed: \$ _____ Date _____		
Signature: _____		

Please make check payable to your home parish and mail to...

Parish Office
C/O Faith Formation Registration
27528 Patrick Street
Madison Lake, MN 56063

QUESTIONS:

Please reach out to the Parish Office with any questions...

Email: office@maryschurches.com

Voice Mail: 507-243-3166

Let's grow in faith together!