

Student Information Continued: Please fill in all requested information and check (✓) the Faith Formation option for each student registering.

PLEASE NOTE: *Sacramental Preparation (First Communion and Confirmation) is a two-year process. In the second year of preparation, registration is required for Youth & Family Faith in addition to Sacrament Preparation Year 2. **

Student(s) Name	New student to SS. Peter & Paul Faith Formation	Enrolled last year	Not new but not enrolled last year	Youth & Family Faith Sunday 9:30 AM – 10:45 AM Preschool - 8 th Grade	Youth & Family Faith Sunday 3:30 PM – 4:45 PM Preschool - 8 th Grade	Youth & Family Faith Monday 3:30 PM – 4:45 PM Preschool - 8 th Grade	Youth & Family Faith Monday 6:30 PM – 7:45 PM Preschool - 8 th Grade	*Sacrament Prep Year 2 First Communion or Confirmation	RCIA Year 2 Monday 6:30 PM-7:45 PM	High School Youth Ministry 9 th – 12 th Grade

Emergency Contact Information & Photo/Video Release (Please read and sign)

Emergency contact (other than parent): _____ Relationship to student(s): _____

Phone #: _____ **IF I CANNOT BE REACHED IN CASE OF AN EMERGENCY, THE BEARER OF THIS FORM IS AUTHORIZED TO ACT ON MY BEHALF TO SEEK MEDICAL TREATMENT AS THEY DEEM NECESSARY FOR THE STUDENT(S) REGISTERED.** _____ *Please Initial*

Photo/Video release: I hereby grant permission for my child to be photographed and/or videotaped during Faith Formation. I understand that my child may decline to be photographed and/or videotaped at any time. I further grant permission for the resulting photographs and/or videotaped footage to be edited, if necessary, and then published and/or broadcast for the purpose of promoting the Faith Formation programs at SS. Peter & Paul Church.

Accept: _____ Decline: _____ Parent/Guardian Signature: _____ Date: _____

Registration Fees/Payment Information

Total # of students registering: _____

Registration Fee: \$50 X Total # of students \$ _____

Sacrament Prep Fee: \$50 X # of students \$ _____
(Year 2 First Eucharist and Confirmation students- NOT RCIA Year 2)

Total Fees Due \$ _____

For Office Use Only

Date Received: _____ Amount Paid: _____ Volunteer Interest? _____

Check #: _____ Credit Card: _____ Cash: _____

Receipt Issued: _____ Payment Plan: _____ Calendar Given: _____

Email checked in PDS: _____ Email checked/added to Flocknote: _____

