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| **ST. JAMES CATHEDRAL - Children’s Faith Formation (CFF) Registration Form** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Class Start Date** | | **9/18/2016** | | | | | | | **Class End Date** | | | | | | | **6/11/2016** | | | | | | | | | **Grade** | | | | | | | | | |  | | | | | |
| **YOUTH or CHILD** | | | | | | | | | | | | | | | | | | | | **My Child is:** | | | | | | | | | **🞏 Male** | | | | | | | | **🞏 Female** | | | |
|  | | | | |  | | | | | | | |  | | | | | | | |  | | | | | | | | | | |  | |  | | | | | | |
| \* Last Name(s) | | | | | \* First Name(s) | | | | | | | | \* Full Middle Name | | | | | | | | \* Birth Date mm/dd/yy | | | | | | | | | | | Age | | Place of Birth | | | | | | |
|  | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |  |
| \* Family Address | | | | | | | | | | | | | | | | | | | \* City, State | | | | | | | | | | | | | | | | | | | | | \* ZIP |
|  | | | | | | | | | | | | | | | | | | |  | | | |  | | | | | | | | | | | | | | | | | |
| \* Family e-mail address | | | | | | | | | | | | | | | | | | | Grade | | | | School | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **🞏 FATHER or 🞏 GUARDIAN** (check one) | | | | | | | | | | | | | | Does this person want emails and reminders? | | | | | | | | | | | | | | | | | | | | | | | | **🞏 Yes** | | | |
|  | | | |  | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | First Name | | | | | | Religion | | | | | | | \* E-mail (if different from family email above) | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
| Address (if different from family address above) | | | | | | | | | | City | | | | | | | | | | | | Primary Phone | | | | | | | | | | | Secondary Phone | | | | | | | |
| **🞏 MOTHER or 🞏 GUARDIAN** (check one) | | | | | | | | | | | | | | Does this person want emails and reminders? | | | | | | | | | | | | | | | | | | | | | | | | **🞏 Yes** | | | |
|  | | | |  | | | | | |  | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | | | First Name | | | | | | Religion | | | | | | | \* E-mail (if different from family email above) | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | |  | | | | | | | | | | | |  | | | | | | | | | | |  | | | | | | | |
| Address (if different from family address above) | | | | | | | | | | City | | | | | | | | | | | | Primary Phone | | | | | | | | | | | Secondary Phone | | | | | | | |
| \***Email Policy**: By providing us with your email address, you permit us to send you updates, reminders, and calendars for this program and will not consider these emails as spam. All emails will have “St. James” in the subject line, and only the Faith Formation Staff will have access to your address. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| ***YOUR CHILD’S SACRAMENTAL HISTORY:*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **BAPTISM** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Baptism Completed | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |  | | | | |  | | | | |
| Church | | | | | | | | | | | | City | | | | | | | | | | | | State | | | | Country | | | | | Denomination | | | | |
| 🞏 My Child has NOT been baptized; we want to know more about Baptism. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **FIRST HOLY COMMUNION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 1st Holy Communion Celebrated | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |  | | | | | | | | | |
| Church | | | | | | | | | | | | City | | | | | | | | | | | | State | | | | Country | | | | | | | | | |
| 🞏 My Child has NOT celebrated First Holy Communion and is 9 or older (complete the form for RCIA/C)  🞏 My Child has NOT celebrated First Holy Communion and is 8 or younger , we want to know more about First Holy Communion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CONFIRMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Confirmation Completed | | |  | | | | | | | | | | | |  | | | | | | | | | | | |  | | | |  | | | | | | | | | | |
| Church | | | | | | | | | | | | City | | | | | | | | | | | | State | | | | Country | | | | | | | | | | |
| 🞏 we want to know more about Confirmation (Confirmation candidates must be 16) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **EMERGENCY CONTACTS:** Please provide up to two non-parent/guardian contacts. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| Name | | | | | | | | | Phone | | | | | | | | | | | | | | | | | Relationship to Child | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **SPECIAL NEEDS OR CONDITIONS:** List any medical conditions and allergies, special learning needs, or restricted contacts for security. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **PARTICIPATION OPPORTUNITIES:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Classroom Assistant for any grade | | | | | | | | | | | | OR for a specific grade: | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |
| 🞏 Welcome Team: Greet families at the door and safeguard our kids | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Special Events: Help with the Christmas Party, Corpus Christi, General Assemblies, or other one-time opportunities | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Help during the program while waiting | | | | | | | | 🞏 Financial Assistance check for needy families: | | | | | | | | | | | | | | | | | | | | $ | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CHILD’S PARISH INVOLVEMENT:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞏 Altar Server | | | | | | 🞏 Youth Reader | | | | | | | | | | 🞏 Youth Usher | | | | | | | | | | | | | | 🞏 Children’s Choir | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***For Office Use only*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *Total Amount Paid* | *# of Children in CFF* | | | | | | *Part Donation?* | | | | *Paid Date* | | | | | | | *Check #/Cash* | | | | | | | | | | *Parish ID* | | | | | | | | | | | *Entered By* | | | |