Please return by July 31, 2023

Last Name of Student:

Last Name of Parent (if different from student):

2023-2024 St. Louis/St. Mary's Faith Formation Registration

	E. Please Make Cl	Office Use Only Date Received:	
We are members of: St. Mary's St. Louis	Parishioners: \$60.00/Family	Non Parishioners: <i>\$85.00/Family</i>	Amount Paid:
Other	Elementary Teachers: Elementary Helpers:	\$40.00/Family \$50.00/Family	Check #
	High School Small Grou	Cash:	
	Plus Applicable Sacra First Communion - \$25 Confirmation - \$15.00		

Enrollment Fees help defray the expenses for curriculum, catechist materials, resources, and supplies. Your enrollment, along with your continued and consistent weekend offerings, makes it possible for our parishes to support families by offering quality faith formation opportunities to our parish families.

Please return this completed form by July 31, 2023.

Parent(s): _____ Address:

Email Address:

	nnot be reached, please list the f someone we can call in case Phone:	Home Phone: Mobile Phone: In case of cancellation of a class/event, what is the best way to contact you?
Relationship:		·

2023-2024 Student Information

Student's Name(s)	M/F	Date of	Grade in	Write location where each was received.		
		Birth	2023-24	Baptism	Communion	Confirmation
• • • • • • • • • • • • • • • • • • • •						
				<u> </u>		
• • • • • • • • • • • • • • • • • • • •				, , , , , , , , , , , , , , , , ,		
	<u> </u>					I

Please list your child's name with their allergies or medical concerns:

Name of Child

Allergies or Other Medical Concerns:

Health Authorization - *Emergency*

In case of serious injury and I/we cannot be contacted, I/we hereby authorize the Director of Faith Formation or their appointed representative to call an ambulance.

Signature: _____ Date: _____

PHOTO RELEASE PERMISSION: As a parent or guardian of this student(s), I hereby consent to the use of photographs/videotape taken during the course of the school year for publicity, promotional and/or educational purposes (including the parish website and/or bulletin.) ____ Yes, I give consent. ____ No, I do not give consent.

Parent signature: Student(s) names:

Parent Involvement: I understand and agree to the following:

* Child(ren) Pre-k–12th grades will meet every scheduled week at St. Mary's from 6:15-7:45 p.m.

* At least one parent is expected to attend the once a month Parent Night.

As parents, we are the primary educators of our child(ren) in the faith. "Under God, parents are the first in time, first in authority, first in responsibility, first in supernatural ability, and first in dignity to educate their children for eternal life." (Fr. John Hardon) I understand that I am the most important element in passing on the faith to my child(ren.) I understand that the Church will support me in my efforts. I will put the parent gatherings on the scheduled day each month on the top of my priorities because I understand that learning one's faith is a life-long endeavor. This also will set an example for my child(ren) to put God first in all things.

Parent Signature

Date Parent Signature

Date