

ST. JANE FRANCES de CHANTAL FAITH FORMATION PROGRAM REGISTRATION: 2009/2010

38750 Ryan Road • Sterling Heights • Michigan • 48310 • 586-977-0310 • Fax: 586-977-9305

This form is for **all young people who are to be enrolled** in Faith Formation Grades 1-8 for 2009-10. (There will be a separate registration form for those who will be in the 9th Grade Confirmation Program.)

Family (Last) Name: _____ **Home Phone (_____)** _____ **E-mail:** _____

Family Address: _____ **City:** _____ **Zip:** _____ **Envelope #** _____

Cell Phone: Father (_____) _____ **Mother (_____)** _____

Please provide us with other names and phone numbers in case of class cancellation or emergency:

(1) _____ (2) _____

Adults	First Name	Maiden Name	Last Name	Catholic (Y/N)	Resides w/Child (Y/N)	Registered in our parish (Y/N)
Father						
Mother						
Other Adult in home						

Marital Status of Parents: (circle one) **Married** **Separated** **Divorced** **Widowed** **Single**

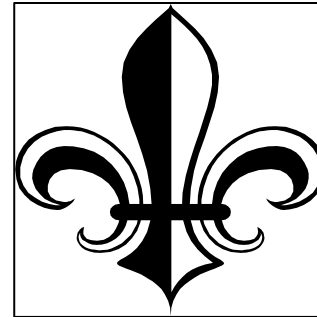
Remarried Name _____ **and/or Step-parent Name** _____

Student's First Name (& last only if different)	Sex	Date of Birth	Grade in Public School Sept. 2009	Name of Public School	Returning to our program? Y/N	Baptized? Y/N	First Communion? Y/N	First Reconciliation? Y/N	Confirmed? Y/N
1)									
2)									
3)									
4)									

***Baptismal Record Policy:** If baptism did not take place at St. Jane Frances we must be provided with a copy of your child (ren)'s baptismal record if not provided in the past.

PLEASE WRITE CHILD'S NAME UNDER THE DAY PREFERRED (Every effort will be made to meet your request., however we cannot guarantee your preference.)

Monday 4:30-5:45 pm Gr. 1-6	Monday 6:30-7:45 pm Gr. 1-6	Tuesday 4:30-5:45 pm Gr. 1-6	Tuesday 6:15-8:15 pm Gr. 7-8



Information helpful to Catechist

(medical problems, medications, learning concerns, special needs, behavior concerns, etc.)

If not at St. Jane Frances, where was child registered for Faith Formation last year: _____

RECOGNIZING THAT I AM MY CHILD'S PRIMARY TEACHER OF THE FAITH, I am choosing this Faith Formation Program for my child which includes a family component, and I will be actively involved in helping him/her grow in the Catholic faith.

Parent's Signature _____



Tuition: (registered families using their Sunday envelope who contribute a minimum of \$350.00 a year to the parish)

One Child \$100.00 Each additional \$50.00

Tuition: (families not registered or not using their Sunday envelopes to contribute a minimum of \$350.00 to the parish)

One Child \$250.00 Each additional \$125.00

<i><u>Office Use Only</u></i>	
Amount Due _____	Paid _____
Date _____	Check # _____
Balance _____	Registration Rec'd. _____