

2018-2019

Church of St. Joseph Faith Formation Registration Form

Please return to the parish office. 108 3rd St NE, Mandan, ND 58554 • Phone: 663-9562

Fees are \$50 for one student, \$80 for two students, and \$120 for three or more students.

PLEASE PRINT CLEARLY & COMPLETE THE ENTIRE FORM

FATHER'S INFORMATION

First: _____ Last: _____

Mailing Address: _____

City/Zip: _____

Student's Primary Address? Yes No

Email: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Catholic Ukrainian Catholic (Baptized Ukrainian Rite)

Other: _____

Registered at the Church of St. Joseph? Yes No

Other Parish (Please List) _____

MOTHER'S INFORMATION

First: _____ Last: _____

Maiden: _____

Mailing Address: _____

City/Zip: _____

Student's Primary Address? Yes No

Email: _____

Home Phone: _____

Cell Phone: _____

Work Phone: _____

Catholic Ukrainian Catholic (Baptized Ukrainian Rite)

Other: _____

Registered at the Church St. Joseph? Yes No

Other Parish (Please List) _____

PARENTS MUST FILL OUT THE FOLLOWING INFORMATION

➔ *In case of an emergency I authorize the St. Joseph Faith Formation Staff to call 911.*

_____ **PARENT SIGNATURE (required)**

➔ *Doctor and hospital requested:* _____

➔ *Person to call if parents cannot be reached, person to contact:* _____

Relation to Child: _____ Home Phone: _____ Cell Phone: _____

CAN YOU HELP?? WE ARE IN NEED OF SOME VOLUNTEERS! K-7 GRADE PARENTS PLEASE FILL OUT!**

Yes I can help teach a class K-7 Mom Dad Both I regret that I cannot help out at this time.

We are also looking for some great people who would like to substitute teach for a class. Would you be willing to help as a sub??

Yes, please put me on the sub list Mom Dad Both I regret that I cannot help out at this time.

A FEW NOTES...

➔ Registration for Faith Formation will be held on August 29th, 2018 at 7pm in the school cafeteria
If you are unable to attend, you may mail in or drop-off your forms to the parish office

➔ Faith Formation classes are held Wednesdays from 7pm – 8:15pm

➔ Please include your registration fees in with your registration form

➔ Weekly and Monthly family communications are done by e-mail. Please make sure that we have an accurate e-mail address so that you will be included in all announcements and happenings at Faith Formation

➔ Schedules will be provided once you have registered

➔ **IMPORTANT: Students receiving the Sacraments of FIRST EUCHARIST or CONFIRMATION; a copy of your child's baptismal certificate IS NEEDED if they were NOT baptized at St. Joseph.**

STUDENT INFORMATION (Please fill out all information)

1. Student's **FIRST** _____ **MIDDLE:** _____ **LAST:** _____

Male Female

➔ **Date of birth:** _____ ➔ **Age:** _____ **Grade:** _____

➔ **Has been baptized? Yes No** **Baptismal Church** _____

Located in the city/state of: _____

➔ **Has made First Reconciliation (Confession)? Yes No**
➔ **Has First Holy Communion? Yes No** **First Communion Church** _____

Located in the city/state of: _____

➔ **Does this child have any medical conditions we should be aware of? Yes No**
If yes, please explain: _____

2. Student's **FIRST** _____ **MIDDLE:** _____ **LAST:** _____

Male Female

➔ **Date of birth:** _____ ➔ **Age:** _____ **Grade:** _____

➔ **Has been baptized? Yes No** **Baptismal Church** _____

Located in the city/state of: _____

➔ **Has made First Reconciliation (Confession)? Yes No**
➔ **Has First Holy Communion? Yes No** **First Communion Church** _____

Located in the city/state of: _____

➔ **Does this child have any medical conditions we should be aware of? Yes No**
If yes, please explain: _____

3. Student's **FIRST** _____ **MIDDLE:** _____ **LAST:** _____

Male Female

➔ **Date of birth:** _____ ➔ **Age:** _____ **Grade:** _____

➔ **Has been baptized? Yes No** **Baptismal Church** _____

Located in the city/state of: _____

➔ **Has made First Reconciliation (Confession)? Yes No**
➔ **Has First Holy Communion? Yes No** **First Communion Church** _____

Located in the city/state of: _____

➔ **Does this child have any medical conditions we should be aware of? Yes No**
If yes, please explain: _____

Thank you for choosing the Church of St. Joseph Faith Formation program. We look forward to a wonderful year with your children. Please be sure that forms are complete before turning them in.

Thank you and God Bless!