## ST. PIO FAITH FORMATION REGISTRATION GRADES K-10 2021-2022

Grades K-8: Saturdays 8:45-10am @ St. John School

Grade 9-10 Confirmation: Sundays 5:30-6:45pm @ St. Mark Church

FAMILY REGISTRATION			
<b>-1 Child</b> \$75		\$80.00 <b>3 or more</b> (	Children\$85.00
	0 Confirmation\$35	1 / 1	
		ly in need (please specify* Check #	amount):
*1	otal Amount	* Cneck #	<del>*</del>
Mother's Name			Religion
First	Maiden	Last	
Father's Name			Religion
First	Middle	Last	
Mailing Address:			
Home Phone #		Cell Phone# (Mom) _	
		Cell Phone# (Dad)	
E-MAIL		E-MAIL (2 <sup>nd</sup> parent- <u>optional)</u>	
EMERGENCY CONTA Name/Phone#/Relationshi			
STUDENT'S NAME	DATE OF BIRTH	GRADE in Sept. 2021	CHECK SACRAMENTS  Already Received  Baptism Reconciliation Communion
**Fill out reverse side A	LSO if your child is pre	paring for a sacrament*	* (Grade 2 & Grade 9)
** <b>O</b> U	R SACRAMENTAL PR	EPARATION IS A 2 Y	EAR PROGRAM**
Is there a <b>learning or hea</b> necessary to explain situat			1? Please attach a separate page if
Yes! I would like to volum		tClassroom Aide e Environment training.	Substitute Set-up/Hall Monitor
agree that as parents, we are Christian behavior at Faith and Eucharist) and attendar	e the first educators respons Formation Classes; weekly nce at parent meetings for S	sible for their spiritual grow Mass attendance, frequent b acramental Preparation. I u	ce in my child(ren)'s faith formation. I th which includes: child's attendance and reception of the Sacraments (Reconciliation understand that the Staff and Catechists of se to cooperate and support the process.

## RECONCILIATION, FIRST COMMUNION, CONFIRMATION (Grade 2 & Grade 9)

## \*\*PHOTOCOPY OF BAPTISMAL CERTIFICATE MUST BE ATTACHED IF NOT BAPTIZED AT ST. JOHN, OLD SAYBROOK, CT or ST. MARK, WESTBROOK, CT

1. Child's Full Name at Baptism:			
Date of Birth / Birthplace (City, State):			
Date of Baptism:			
Baptismal Parish:			
Address:			
Date of Reconciliation:			
Parish:			
Address:			
Date of First Communion:			
Parish:			
Address:			
2. Child's Full Name at Baptism			
Date of Birth / Birthplace (City, State):			
Date of Baptism:			
Baptismal Parish:			
Address:			
Date of Reconciliation:			
Parish:			
Address:			
Date of First Communion:			
Parish:			
Address:			

Please return form and fee to: St. Pio Faith Formation, 161 Main St., Old Saybrook, CT 06475.