

ST. PIO FAITH FORMATION REGISTRATION GRADES K-9

2019-2020

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

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

REGISTRATION (AFTER AUG. 1ST):

-1 Child -----\$75.00
-2 Children -----\$80.00
-3 or more Children -----\$85.00

OR: PLEASE CIRCLE:

-Already registered at St. Mark. **Transfer enrollment to St. Pio.**

-Already registered at St. Mark. **Will attend another program.**

Refund please.

*Amount due _____ * Check # _____ *

Are you a registered parishioner? Yes ☐ No ☐ (Please complete a parish registration form: stjohnstmark.org)

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(2nd parent-optional) _____

EMERGENCY CONTACT PERSON

Name/Phone#/Relationship

STUDENT'S NAME	DATE OF BIRTH	GRADE in Sept. 2019	CHECK SACRAMENTS		
			Already Received		
			Baptism	Reconciliation	Communion
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

****Fill out reverse side ALSO if your child is celebrating a sacrament this year** (Grade 2 & Grade 9)**

****OUR SACRAMENTAL PREPARATION IS A 2 YEAR PROGRAM****

Is there a **learning or health situation** you want us to know about your child? Please attach a separate page if necessary to explain situation: _____

Yes! I would like to volunteer (Please check): Catechist* _____ Classroom Aide* _____ Substitute* _____

*Need to attend Safe Environments session for child protection or complete online training.

PARENTS' COVENANT: In signing this registration, I am aware of my importance in my child(ren)'s faith formation. I agree that, as parents, we are the first educators responsible for their spiritual growth, which includes: child's attendance and Christian behavior at Faith Formation Classes; weekly Mass attendance, frequent reception of the Sacraments (Reconciliation and Eucharist) and attendance at parent meetings for Sacramental preparation. I understand that the Staff and Catechists of St. Pio Parish are here to assist in the faith formation of my child(ren) and I promise to cooperate and support the process.

Parent(s) Signature _____ Date _____

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: _____