

PHONE: 518-439-4951

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Growing In Faith Together 2017-2018 Registration Form

Date Received: _____ **FOR OFFICE USE ONLY** Parish # _____

Program Fee: _____ 1st Eucharist Fee: _____ Confirmation Fee: _____ Check No.: _____

IMPORTANT: If a child is coming into our faith formation program for the first time, we also require a **New to Faith Formation** form and
*****A COPY OF THE CHILD'S BAPTISMAL CERTIFICATE!!!*****

Family Last Name _____ Mother _____ Father _____

Primary Address: _____ City: _____ NY Zip: _____

Primary Email: _____ Secondary Email: (opt.) _____

Home Ph. _____ Mom's Work Ph. _____ Dad's Work Ph. _____

Mom's Cell Phone: _____ Dad's Cell Phone: _____

Contact Information if parent is unable to be reached:

Name: _____ Phone Number: _____ Relationship to child(ren): _____

Faith Formation Weekly Class Offerings				
Grades 1-5	Tuesday "T"	Wednesday "W"	Thursday "R"	4:30 - 5:30 pm
Grades 6-12	Tuesday "T"	Wednesday "W"	Thursday "R"	6:00 - 7:15 pm
Grades 6-12	Tuesday "T"	Wednesday "W"	Thursday "R"	7:30 - 8:45 pm

Student Name (Please Print)		(Circle) Sex		M/D/YR Birth Date	Grade Sept 2017	First Choice			Second Choice			
First Name	Last Name	M	F			Day	Time	Day	Time			
		M	F			T	W	R		T	W	R
		M	F			T	W	R		T	W	R
		M	F			T	W	R		T	W	R
		M	F			T	W	R		T	W	R

Does any child being registered have an IEP or medical problems of which we should be aware?
 Yes ___ No ___

Please describe: _____

I give consent for my child(ren) to be photographed while participating in the Saint Thomas Faith Formation Program and consent to the use of such photographs in the Faith Formation and Youth Ministry Programs.

Yes No

Registration Fee \$115.00 for 1 child, \$190.00 for 2 children, \$240.00 for 3 or more children (Nonrefundable after 9/21/17)

*** 1st Eucharist registrants please add an additional \$40.00 for the extra classes and books. ***

*** Catholic School Students only pay a Confirmation fee of \$50.00 ***

~~**Early Bird Special**---Subtract \$15 {once per family} from total class registration fee if received by May 31, 2017!!~~
 {Early Bird Not Applicable to First Eucharist or Confirmation Fees}

Name: _____

In what capacity will you be able to volunteer in our program for the coming year? {All volunteers must fill out an application (once), a volunteer form (each year), and a background check (once), sign social media and tech. policy agreements (once), and complete a 2-hour VIRTUS training class (once)}

_____ **Catechist:** Grade Level: _____ Day: _____ {T/W/R}
Time preference (MS/HS only): _____
{Full registration fee waived.}

_____ **Class Assistant:** Grade Level: _____ Day: _____ {T/W/R}
Time preference (MS/HS only): _____
{Half of registration fee waived.}

_____ **Gatekeeper:**
Time preference Elem. 4:15-5:40pm: _____ {T/W/R}
MS/HS 6-7:15pm: _____ {T/W/R}
MS/HS 7:30-8:45pm: _____ {T/W/R}
{Half of registration fee waived.}

_____ **First Eucharist Class Catechist:**
_____ 1 Sunday during the months Nov. through Feb. (8am-9:30am)
_____ 1 Monday during the months Nov. through Feb. (5:45pm-7:15pm)
{First Eucharist fee waived.}

_____ **Share Your Talent:** _____ Arts & Crafts _____ Web Design
_____ Music _____ Fundraising (Pancake Breakfast) _____ Babysitting
_____ Baking _____ Speaker (_____) _____ Theater _____ Athletics
_____ Other (_____)