

2022-2023

St. Theodore's Church
Faith Formation Program
429-5650

Office Use Only:

Fee Charged \$ _____
Fee Paid \$ _____
Date _____
Cash _____ Check # _____
Census Form _____

REGISTRATION FOR GRADES 1-9

PLEASE PRINT CLEARLY

Family (Last) Name: _____

Address: _____ City/Town: _____ Zip Code: _____

Home Phone: _____ Email: _____

Father's First & Last Name: _____ Religion: _____

Mother's First & Last Name: _____ Religion: _____

Child(ren) Resides With: Both Parents _____ Mother _____ Father _____

Mother's Cell #: _____ Work #: _____ Father's Cell #: _____ Work #: _____

Emergency Contact (Other than a parent): _____ Phone #: _____

Relationship to your child(ren): _____

Registered member of St. Theodore's Parish? (Census form on file, attends Mass regularly and financially supports the parish using church envelopes.) Yes ___ No ___ If not, parish registered at: _____

WHEN COMPLETING REGISTRATION INFORMATION, PLEASE LIST OLDEST CHILD FIRST.

CHILD #1 INFORMATION

Child's First & Last Name: _____ M/F: _____

Birth Date: _____ Age: _____ School Grade: (Sept. 2022) _____ Religion Grade: _____

Please indicate if your child has any learning disabilities, health problems, allergies, or ADD/ADHD.

This is very important for classroom placement. _____

Sacraments Completed: Reconciliation _____ Eucharist _____ Confirmation _____

_____ Re-Registration

_____ New Registration **A copy of child's Baptismal Certificate is needed. Baptism Date:** _____

Church: _____ Address: _____

Circle class time for Child #1: Grades 1-6: Monday: 5:00-6:00 p.m. Grades 7-9: Monday: 7:00-8:00 p.m.

CHILD #2 INFORMATION

Child's First & Last Name: _____ M/F: _____

Birth Date: _____ Age: _____ School Grade: (Sept. 2022) _____ Religion Grade: _____

Please indicate if your child has any learning disabilities, health problems, allergies, or ADD/ADHD.

This is very important for classroom placement. _____

Sacraments Completed: Reconciliation _____ Eucharist _____ Confirmation _____

_____ Re-Registration

_____ New Registration **A copy of child's Baptismal Certificate is needed. Baptism Date:** _____

Church: _____ Address: _____

Circle class time for Child #2: Grades 1-6: Monday: 5:00-6:00 p.m. Grades 7-9: Monday: 7:00-8:00 p.m.

CHILD #3 INFORMATION

Child's First & Last Name: _____ M/F: _____

Birth Date: _____ Age: _____ School Grade: (Sept. 2022) _____ Religion Grade: _____

Please indicate if your child has any learning disabilities, health problems, allergies, or ADD/ADHD.

This is very important for classroom placement. _____

Sacraments Completed: Reconciliation _____ Eucharist _____ Confirmation _____

____ Re-Registration

____ New Registration **A copy of child's Baptismal Certificate is needed. Baptism Date:** _____

Church: _____ Address: _____

Circle class time for Child #3: Grades 1-6: Monday: 5:00-6:00 p.m. **Grades 7-9:** Monday: 7:00-8:00 p.m.

For additional children in same family, please make a copy of this form and attach it to your registration.

***** **PARENT SIGNATURE REQUIRED** *****

Please read carefully

- In the event of a medical emergency, if a parent or emergency contact person cannot be reached, I give permission for my child to be transported by ambulance to receive medical treatment. Yes ___ No ___
- I give permission for St. Theodore's to take pictures of my child during religion programs for use in the parish bulletin, bulletin boards, and the parish's Facebook page. Yes ___ No ___
- I understand that enrolling my child(ren) in the Faith Formation program requires commitment and consistent attendance. I also understand that in addition to the number of scheduled days off, students are only allowed four absences. It is my responsibility to notify the office and to complete the missed class assignment.
- In addition to attending weekly religion classes, I agree to enrich the faith of my child(ren) at home, including regularly attending Mass as a family.

Parent Signature: _____ **Date:** _____

FAITH FORMATION REGISTRATION FEES

FORMS AND PAYMENT NEED TO BE RECEIVED BY AUGUST 30.

PLEASE NOTE: AFTER AUGUST 30, THERE WILL BE A \$25 INCREASE PER CHILD.

In order to receive the registered member fee, a family must have a census form on file, financially support the parish using church envelopes and attend Mass. The registration fee must accompany the form. If you are unable to make a payment at this time, **do not delay sending in your form;** please call Maureen Piehler to discuss this matter.

Registered Member of St. Theodore's: One child: \$65.00. Two or more from the same family \$115.00.

Member of Another Parish: One child: \$95.00. Two or more from the same family: \$165.00.

Please return this completed registration form and fee to:

St. Theodore's Church, Faith Formation Office, 168 Spencerport Road, Rochester, NY 14606

Cash or checks made payable to "St. Theodore's Church."

You can also pay your registration fee by using your bank's online banking feature.

Just add St. Theodore's Church as a payee. Write that it is for the Faith Formation fee.

Make a note on the registration form so the office is aware.