

# Immaculate Heart of Mary Catholic Parish

Children's Faith Formation

**2011 - 2012**

Child Last Name		First Name	email	
Grade	School		Home Phone	
Address		City	Zip	
Date of Birth		Place of Birth		
Parent/Guardian	Relationship to Child	Marital Status	Religion	
Parent/Guardian	Relationship to Child	Marital Status	Religion	
Mother's Maiden Name	Student's Place of Baptism (Church & City/State)			
<b>Number to call in case of an Emergency (other than parent/guardian)</b>				
Name _____		Relationship to child _____		
Phone _____		Alternate Phone _____		
<b>Sacrament's Received: (Please indicate date and church)</b>				
Baptism _____		Reconciliation _____		
First Eucharist _____		Confirmation _____		
<b>Are you registered in the parish?</b> Yes _____    No _____				
<b>List any special needs</b> (for example: ADD, learning difficulties, physical or learning difficulties, medications, allergies, etc)				
<b>Programs Registering For:</b>				
_____ Religious Education (Wednesday, 6:00p.m.)		<b>Please Circle Grade:</b> P   K   1   2   3   4   5 Middle School – see separate registration form.		
_____ Special Needs Group				
<b>Opportunities to Volunteer:</b> In order for our program to be a success we encourage you to volunteer in an area.				
_____ Religious Ed Teacher		_____ Classroom Aide		_____ Christmas Pageant
_____ Family nights		Other (your suggestion) _____		
<b>Registration Fees for Wednesday Night Religious Education Classes*:</b>				
*Fee waived for children of parents who volunteer weekly.		Scholarships available.		
<b>\$30.00 per student</b>		<b>\$50.00 family of 2</b>		<b>\$75.00 family of 3 or more</b>
Paid: _____		Check# _____		Cash: _____