



CCD Registration 2020-2021

PLEASE FILL OUT ONE REGISTRATION FORM FOR EACH FAMILY

1. Student's Name _____
(Last) (First – No Nickname) (Middle - Full Name)

Male Female Grade Level Sept. 2020 ____ School Name _____ Date & Place of Birth _____

2. Student's Name _____
(Last) (First – No Nickname) (Middle - Full Name)

Male Female Grade Level Sept. 2020 ____ School Name _____ Date & Place of Birth _____

3. Student's Name _____
(Last) (First – No Nickname) (Middle - Full Name)

Male Female Grade Level Sept. 2020 ____ School Name _____ Date & Place of Birth _____

Home Address _____

Email Address that you check several times a day. (Please Print Clearly) _____

Communication from the Faith Formation Office is through email and/or EBLAST that can only be opened on a computer. **OUR EBLASTS ARE NOT MOBILE COMPATIBLE.** The office is not responsible for any undeliverable email addresses.

Phone Numbers (List 2 best contact numbers) _____
(Home) (Cell)

Emergency Contact:
Someone who can pick up your child _____
in the event you cannot be reached (Name) (Phone Number)
Relationship to child: _____

Name of Parish/Address to which you belong: Parish Name & Address _____

Where did child attend Religious Education last year: Parish Name & Address _____

Sacramental Information: (FOR NEW STUDENTS ONLY – GRADES K-8)

Date of Baptism _____ Parish Name & Address _____

Date of First Reconciliation _____ Parish Name & Address _____

Date of First Eucharist _____ Parish Name & Address _____

Please circle the number that best describes the family:

- 1. Student lives with both parents (same last name)
- 2. Student lives with both parents (different last name)
- 3. Student lives only with mother (same last name)
- 4. Student lives only with mother (different last name)
- 5. Student lives only with father
- 6. Student lives with guardian (different last name)
- 7. Other _____

Father's Name _____ Mother's Name _____ Mother's Maiden Name _____

TENTATIVE SCHEDULE

Schedule of classes - Grade 1 through Grade 8 - (please check a 1st and 2nd choice of days and program you prefer)

- MONDAY – ST. GERMAINE SITE - 6:30-7:45 PM
- THURSDAY – ST. GERMAINE SITE – 6:30-7:45 PM
- TUESDAY – NATIVITY SITE – 5:00-6:15 PM
- HOMESTUDY
- WEDNESDAY – ST. VALENTINE SITE - 6:30-7:45 PM

Fees: First child - \$50.00 Two or more children - \$75.00

Checks can be postdated for August 1, 2020. Please make checks payable to *St. Valentine Church*.

I can volunteer as a:

On-Site Catechist _____ On-Line Catechist _____ Substitute Catechist _____ Hall Monitor _____

Due to CCD Guidelines, class sizes will be limited. Please pick a 1st and 2nd choice of days of the weeks.

Please select: 1st Choice _____ Site _____
2nd Choice _____ Site _____

I give permission to the Faith Formation program to use photographs, videos, voice recordings, and quotations for the purpose of promoting CCD activities and programs.

Student's Special Concerns: Learning ____ Behavioral ____ Medical ____ Allergies (Please List) _____

PLEASE ATTACH OR LIST ANY INFORMATION YOU FEEL MAY BE HELPFUL TO YOUR CHILD'S LEARNING ENVIRONMENT:

 Parent/Guardian Signature _____ Date _____