

Faith Formation

FAITH FORMATION
Auburn and Cayuga County Catholic Parishes

299 Clark St, Auburn, NY 13021

(315) 252-7593

# Faith Formation Registration 2024-2025

### Child's Information

Last Name	First Name		Middle	Parish			
Home Address			City, State		Zip		
Date of Birth	Grade entering in	School Attending					

# Attach copy of Baptismal certificate <u>if</u> child was not baptized in St. Mary's, SS Mary & Martha or Our Lady of the Snow.

Baptism Date	Parish where Baptism took place
First Penance Date	Parish where First Penance took place
First Communion Date	Parish where First Communion was received
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# Please Choose a Program: \_\_\_ Allelu: Pre-K for Home School \_\_\_ Kindergarten Faith Club: Kindergarten \_\_\_ Home School \_\_\_ \_\_ Family of Faith: 1st through 5th Grade \_\_\_ Home School \_\_\_ \_\_ Catholic Connections: 6th-7th Grade \_\_\_ Home School \_\_\_ \_\_ First Penance \_\_\_ First Communion \_\_\_ Confirmation: Year 1\_\_\_ Year 2 \_\_\_

## Registration fee:

\$30 for 1st Child, \$20 for each additional child up to \$100 maximum per family \*\*\*If your only child is in Pre-K OR Kindergarten the fee is \$20 Checks should be written out to "Faith Formation".

Mail registration forms to: Faith Formation, 299 Clark St, Auburn, NY 13021

\*If you cannot afford the registration fee, please call the Faith Formation Office at 315-252-7593

\*Finances will not keep a child(ren) from participating in Faith Formation

Child's Health and Safety Information						
Does your child have any allergies or special real All medications, EpiPens, etc. must remain in the *NKDA = No Known Drug Allergies		-				
Emergency Contact If parents are not available	Emergency Contat's Phon	e Number				
Who else has your permission to pick up y	your child?					
Do you have any objections to your child's photo being taken and/or displayed in church for special events? Yes No						
Family Information: Email and Phone are required.  Please put at least one email down. Emails are our primary forms of communication.						
<u>PLEASE</u> <u>NEATLY</u> PRINT OUT EMA	AIL ADDRESS & PHONE NU	MBERS. Thank you!				
Mother's Name	Mother's best phone number (cell preferred)	Mother's second-best phone number (work/home)				
Mother's email address						
Father's Name	Father's best phone number (cell preferred)	Father's second-best phone number (work/home)				
Father's email address						
□ Married [	□ Divorced □ Sepa	urated				

Who is the primary contact (First person to call, email, etc.)? \_\_\_\_\_\_