

ST. JOHN CCD/CONFIRMATION REGISTRATION 20_____

161 Main Street, Old Saybrook, CT 06475

Family Name: _____
(As it is registered with Parish)

Parish Registered with: _____

Fathers Name: _____ Religion _____

Fathers Work Phone#: _____ Cell Phone#: _____

Mothers Name: _____ Religion _____

Mothers Work Phone#: _____ Cell Phone#: _____

Child(ren) live with: _____
(Mother, Father, Both Parents, Other....)

Home Address: _____
(Mailing, #, Street, Town, State, zip)

Home (family) Email: _____

Home Phone#: _____ Other Phone#: _____

Emergency Contact Person: _____
(Name) (Phone) (Relationship)

Pick Up Person: _____
(Name) (Phone) (Relationship)

Pick Up Person: _____
(Name) (Phone) (Relationship)

Child Name: _____
(Age) (DOB) (Grade Entering) (School)

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FEES: GRADE K – 9 \$45.00 (Registration fee for the first student)
 \$15.00 (Each additional student)
 Confirmation Charge: \$30.00 (Robes, Stoles, Etc...)
 Maximum Charge: \$90.00 (Maximum Charge per Family)
 Late Charge: \$25.00 (In addition to ALL other Fee's) If Paid After August 1st.

Paid _____ Cash/Check # _____ Date _____ CATECHIST- NO CHARGE
 (Amount) (Make Checks Payable To St. John Church)

Please inform us of any special circumstances you would like the Office of Catechist to be aware of, such as: **medical conditions, etc...**

Your concerns, suggestions:

PARENTS' COVENANT

In signing this registration, I/we are aware of our importance in our child's faith formation. I/we agree that, as parents, we are responsible for their spiritual growth, which includes: child's attendance and Christian behavior at Religious Education classes; weekly Mass attendance, frequent reception of the Sacraments (Reconciliation and Eucharist) and attendance at parents' course and meetings for Sacramental preparation. I/We understand that the Staff and Catechists of St. John's Parish are here to assist in the faith formation of my child/children and I/we promise to cooperate and support the process.

 (Parent(s) signature)

 (Date)