

Family Last Name: _____ Parish ID # _____ Need to register? _____

Student (s) Live with (please circle): Both Parents Mother Father **Guardian** (Relationship): _____

Home Address: _____ E-Mail Address: _____

_____ Home Telephone: _____

Mother's Name: _____ Mother's Work/Cell: _____

Father's Name: _____ Father's Work/Cell: _____

IN CASE OF EMERGENCY, and in the event parents or legal guardians cannot be reached, please contact:

NAME: _____ RELATIONSHIP TO CHILD(REN): _____

PHONE: _____ PERMITTED TO RELEASE CHILD(REN): YES NO (circle one)

Please check all that apply below:

- I authorize and give full consent to photograph my child during parish activities and events. This may be used in the parish bulletin, parish web site or on parish bulletin boards. **I DO NOT AUTHORIZE** the above photography consent.
- I have received and read the family handbook, and agree to all guidelines / policies therein.
- By providing my phone & email address above **I consent** to phone, text, email communication from the parish (**do not** provide above if you **do not** consent) Please specify which cell number we may use for texting.
- I am enclosing \$60.00 per student for Formation Year Tuition**
adult volunteer discount: tuition = \$40.00 per child, if adult is *certified catechist* discount, full tuition waived)
- I am enclosing \$50.00 per student (receiving a sacrament this year) for Sacrament Preparation Tuition**
- I would like to make a contribution to sponsor tuition for those unable to pay. (*The tuition covers textbooks, resource materials, supplies and expenses*) **No family will be turned away due to inability to pay.**
- I have attached a **Copy of Baptismal Certificate** if student is receiving a sacrament in **2018**.

St. Thomas Aquinas Catholic Church needs to be aware of the following medical information or special learning needs of my child (example = allergies, asthma, learning difference, etc.) You will be contacted by the Faith Formation office and your child's teacher to discuss specifics. Please note below:

(Office Use: # of children x tuition)		
#	x \$	= \$
#	x \$	= \$
Total tuition due:		\$
Amount Paid:		\$
<input type="checkbox"/> Cash	_____	<input type="checkbox"/> Ck# _____
(\$250.00 max total tuition per family - additional retreat fees may apply)		

Signature of Parent / Guardian

Printed Name

Date

Student Information (Please Print and fill out completely!)

First Child: LAST Name _____ FIRST Name _____

Birth Date ____ / ____ / ____ Age as of 9/01/17 ____ Grade (Fall '17) _____

School _____

SACRAMENTS RECEIVED BY CHILD:	Date/Church/City/State
Baptism Yes No	_____
First Reconciliation Yes No	_____
First Holy Communion Yes No	_____
Confirmation Yes No	_____

Previous Religious Ed Completed: _____

Any allergies we should know about? _____

2nd Child: LAST Name _____ FIRST Name _____

Birth Date ____ / ____ / ____ Age as of 9/01/17 ____ Grade (Fall '17) _____

School _____

SACRAMENTS RECEIVED BY CHILD:	Date/Church/City/State
Baptism Yes No	_____
First Reconciliation Yes No	_____
First Holy Communion Yes No	_____
Confirmation Yes No	_____

Previous Religious Ed Completed: _____

Any allergies we should know about? _____

3rd Child: LAST Name _____ FIRST Name _____

Birth Date ____ / ____ / ____ Age as of 9/01/17 ____ Grade (Fall '17) _____

School _____

SACRAMENTS RECEIVED BY CHILD:	Date/Church/City/State
Baptism Yes No	_____
First Reconciliation Yes No	_____
First Holy Communion Yes No	_____
Confirmation Yes No	_____

Previous Religious Ed Completed: _____

Any allergies we should know about? _____

PLEASE COMPLETE BOTH SIDES!

Check required sessions below:

____ **Grades K-6 Weekly Options (Check day and time below):**

Sundays 9:00 AM - 10:15 AM _____

Wednesdays 4:45 PM - 6:00 PM _____

Wednesdays 6:15 PM - 7:30 PM _____

Family Faith Sundays _____ Family Faith Wednesdays _____

____ **Grades 6-8 Weekly Edge Options (Check day and time below):**

Wednesdays 6:15 PM - 7:30 PM _____

TEEN PHONE / EMAIL _____

____ **Grades 9-12 Life Teen Youth Ministry**

Sundays from 5:00 PM Mass **TEEN T-SHIRT SIZE** _____

TEEN PHONE / EMAIL _____

____ **RCIA** (adapted for youth) *** see supplemental forms

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