

St. Francis Xavier Catholic Church
Faith Formation Registration Form

Student Information

Please fill out for each child you are registering for faith formation.

Gender: ___ Male ___ Female

Date of Birth:

Grade Level for 2018-19:

School for 2018-19:

Extracurricular Activities:

Favorite Subject in School:

During which of the following years did your child participate in faith formation:

___ preschool ___ kindergarten ___ 1st ___ 2nd ___ 3rd ___ 4th
 ___ 5th ___ 6th ___ 7th

Sacraments received:

___ baptism ___ first reconciliation ___ first communion ___ confirmation

Allergies:

Is there any relevant information we should know about your child's health and behavior?

Please let us know if your child is unable to read at this time.

Please feel free to share below or contact Natasha Virnig via email or phone.

St. Francis Xavier Faith Formation
Please return with registration materials.

Parent/Guardian Information #1

Your relationship to the student:

Does the student live with you?

all the time half of the time occasionally never

First Name:

Last Name:

Home Address:

Cell Phone Number:

Email Address (Email is the primary way we communicate with families.):

Are you Roman Catholic? yes no

If not, with which religion, if any, do you identify?

I am willing to volunteer once a month as a: classroom assistant hall monitor

(All adults who volunteer with children must complete a background check and the Madison Diocese's online training for child abuse prevention, which takes approximately one hour.)

Media Release Form

I give permission for St. Francis Xavier Catholic Church to use any photos or videos taken during faith formation, in which my son/daughter is included, in promotional materials. I understand that my son/daughter will not be identified by name.

Yes No

Parent/Guardian Signature _____

Date _____

PLEASE RETURN WITH REGISTRATION MATERIALS.

**St. Francis Xavier Faith Formation
Please return with registration materials.**

Parent/Guardian Information #2

Your relationship to the student:

Does the student live with you?

all the time **half of the time** **occasionally** **never**

First Name:

Last Name:

Home Address:

Cell Phone Number:

Email Address (Email is the primary way we communicate with families.):

Are you Roman Catholic? **yes** **no**

If not, with which religion, if any, do you identify?

I am willing to volunteer once a month as a: **classroom assistant** **hall monitor**

(All adults who volunteer with children must complete a background check and the Madison Diocese's online training for child abuse prevention, which takes approximately one hour.)