

Family Information: Registered at St. Joseph? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, where registered? _____ Family Last Name: _____ Father's Name: _____ Mother's Name: _____ Address: _____ Address (if different): _____ _____ Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No Cell Phone: _____ Cell Phone: _____ Family Email: _____ Family's Preferred Language? <input type="checkbox"/> English <input type="checkbox"/> Spanish <input type="checkbox"/>	Number of Children enrolled in Formation and Youth ministry ___ x \$75/child (max \$225) Number of Children enrolled in First Reconciliation/Eucharist and/or Confirmation ___ x \$100/child	\$ _____ \$ _____ Total: \$ _____
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Student #1

First, Last, Middle Name	Grade	What will your child be doing for ongoing formation this year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Family Faith Formation (grades PreK-5) <input type="checkbox"/> Middle School Youth Ministry (grades 6-8) <input type="checkbox"/> High School Youth Ministry (grades 9-12) <input type="checkbox"/> Catholic School	Was your child enrolled in ongoing formation last year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Yes <input type="checkbox"/> No
	School		
Nickname?	Birthdate		Select the sacraments for which you'd like your child to prepare. <input type="checkbox"/> First Reconciliation and Eucharist <input type="checkbox"/> Confirmation
Special Needs?			

Student #2

First, Last, Middle Name	Grade	What will your child be doing for ongoing formation this year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Family Faith Formation (grades PreK-5) <input type="checkbox"/> Middle School Youth Ministry (grades 6-8) <input type="checkbox"/> High School Youth Ministry (grades 9-12) <input type="checkbox"/> Catholic School	Was your child enrolled in ongoing formation last year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Yes <input type="checkbox"/> No
	School		
Nickname?	Birthdate		Select the sacraments for which you'd like your child to prepare. <input type="checkbox"/> First Reconciliation and Eucharist <input type="checkbox"/> Confirmation
Special Needs?			

Student #3

First, Last, Middle Name	Grade	What will your child be doing for ongoing formation this year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Family Faith Formation (grades PreK-5) <input type="checkbox"/> Middle School Youth Ministry (grades 6-8) <input type="checkbox"/> High School Youth Ministry (grades 9-12) <input type="checkbox"/> Catholic School	Was your child enrolled in ongoing formation last year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Yes <input type="checkbox"/> No
	School		

Nickname?	Birthdate		Select the sacraments for which you'd like your child to prepare. <input type="checkbox"/> First Reconciliation and Eucharist <input type="checkbox"/> Confirmation
Special Needs?			

Student #4

First, Last, Middle Name	Grade	What will your child be doing for ongoing formation this year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Family Faith Formation (grades PreK-5) <input type="checkbox"/> Middle School Youth Ministry (grades 6-8) <input type="checkbox"/> High School Youth Ministry (grades 9-12) <input type="checkbox"/> Catholic School	Was your child enrolled in ongoing formation last year? (Required for enrollment in Sacramental Prep) <input type="checkbox"/> Yes <input type="checkbox"/> No
	School		
Nickname?	Birthdate		Select the sacraments for which you'd like your child to prepare. <input type="checkbox"/> First Reconciliation and Eucharist <input type="checkbox"/> Confirmation
Special Needs?			

Photo Release: I, _____, parent/guardian of the child(ren) named on this form, give permission for St. Joseph to post any photos taken of my child(ren) in parish publications or website. Student names will not be published.

X _____ Date _____

Office Use Only:	Payment received? <input type="checkbox"/> Yes <input type="checkbox"/> No	Previous catechesis verified?	Letter of permission needed?
	Date received ____/____/_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> No <input type="checkbox"/> Yes Received? _____