

St. Margaret Mary Faith Formation

Registration Form (2016-2017)

Family's last Name _____ Date _____

Child(ren)'s Address _____ Home Phone _____

City _____ Zip Code _____

E-MAIL ADDRESS (please PRINT) _____ Envelope # _____

Father's Name: _____ Mother's Name: _____

Cell Number: _____ Cell Number: _____

Work Number: _____ Work Number: _____

Marital Status: _____ Religion: _____ Marital Status: _____ Religion: _____

Custodial Parent, if parents are not residing together: _____

Emergency Contact Name: _____ Relationship: _____

Emergency Contact: Home Number: _____ Cell Number: _____

Child Name: _____ Birthdate: ___/___/___ Sex: F ___ M ___

Grade: _____ School _____ Health Problems: _____

Sacraments Received: Baptism: _____ Reconciliation: _____ First Communion: _____

Office Use Only: Session: _____ Paper Work Received _____

Child Name: _____ Birthdate: ___/___/___ Sex: F ___ M ___

Grade: _____ School _____ Health Problems: _____

Sacraments Received: Baptism: _____ Reconciliation: _____ First Communion: _____

Office Use Only: Session: _____ Paper Work Received _____

Child Name: _____ Birthdate: ___/___/___ Sex: F ___ M ___

Grade: _____ School _____ Health Problems: _____

Sacraments Received: Baptism: _____ Reconciliation: _____ First Communion: _____

Office Use Only: Session: _____ Paper Work Received _____

Family Name: _____ Envelope # _____

Faith Formation Sessions (in English) meet once a week, Monday – Thursday 4pm—5:30 pm

Please mark your first (1) and second (2) choice.

_____ Monday • _____ Tuesday • _____ Wednesday • _____ Thursday

Note: Children beyond 3rd grade preparing for *First Eucharist* will attend on Wednesdays ONLY

Faith Formation Sessions (en Español), for Years One & Two for *First Eucharist*, will meet on Saturdays, 9:30am—11:00am _____ Saturday

CONFIRMATION

Confirmation Sessions for **all participants** will be offered on **either** Monday or Tuesday evenings from 7:00 pm to 8:30 pm. Please mark your preference.

_____ Monday _____ Tuesday (Please note: classes are held twice a month)

Program Support (TUITION to cover some expenses)

- Families with one child..... \$100.00/Year
- Families with two or more children..... \$150.00/Year
- Confirmation* Retreat for Year Two & Three Students..... \$145.00/Year
- There will be an additional book fee for Books that are lost..... \$15.00/book
- Reconciliation & First Eucharist fee/For Family's Making 1st Communion only..\$25.00/year

I am interested in leading or helping out in Faith Formation Program – Yes _____ No _____

\$ _____ Tuition Fee (2016-2017)

\$ _____ Previous Year Fee (2015-2016)

\$ _____ 1st Communion fee (2016-2017)

\$ _____ Confirmation Retreat (2016-2017)

\$ _____ Amount Enclosed

\$ _____ Balance Due

Saint Margaret Mary Church

12686 Central Ave. Chino, California 91710-3508 909-591-7400

Photo Release Form

2016-2017

I hereby grant the St. Margaret Mary Church staff permission to use my student's picture(s) for the Parish bulletin, including our Parish website. I understand and agree that these materials will become the property of St. Margaret Mary Church and will not be returned.

I hereby certify that I am the parent or guardian of....

_____ and give my consent without reservation to the foregoing on behalf of my child (ren).

(Parent/Guardian's Signature)

(Date)

(Parent/Guardian's Print Name)

Formulario de Autorización de Fotos

2016-2017

Por la presente le concedo me permiso al personal de la Iglesia de Santa Margarita María de utilizar foto(s) de mis hijo/as para el Boletín Parroquia, incluyendo nuestro sitio web Parroquia. Entiende y acepta que estos materiales pasarán a ser propiedad de la Iglesia de Santa Margarita María y no se devolverán.

Por la presente certifico que soy el padre, la madre, el tutor o la tutora de...

_____ y por este medio doy mi consentimiento sin reservas a lo anterior en nombre de mi hijo(a)s.

(Firma del padre, la madre, el tutor o la tutora)

(Fecha)