

St. Peter Church Higganum

Faith Formation Registration Form 2020-2021

Date_____

Name of Child_____
(First) (Last)

Date of Birth____/____/____ M____F____ Grade entering as of 09/2020_____

Address_____ Town_____ Zip_____

Phone (H)_____ (C)_____ Email_____

Mother's Name _____ Maiden_____

Father's Name _____

Step Parents_____ Child primarily lives with_____

Siblings Names and Date of Birth_____

Registered Member of St. Peter Church Yes____ No_____

Emergency Phone Number Name_____ Phone_____

Did your child attend Religious Education classes last year? -Yes____ No_____

Grade Completed and Where_____

If not, what was the last year completed and where: _____

Sacraments Received-

Please include name of Church, please include Town and State if not St. Peter Church

Baptism: Yes____ No____ Church (city & state) and year:_____

Baptism certificate is needed if this is the 1st time registering.

Reconciliation: Yes____ No___ Church (city & state) and Year:_____

First Communion: Yes___No___ Church (city & state) and Year:_____

Medical Information: If your child has any medical conditions, allergies or learning disabilities please fill out the information below. Please note that all information will be kept confidential.

Medical condition or allergies: Yes___ No___ If Yes please explain:_____

Any special supports or accommodations that they receive at school that may help your child be successful in Faith Formation. Other information you feel program coordinator or catechists should be aware of:_____

Volunteers- Please check off what you wish to help with the Faith Formation Program

Catechist_____

Assistant_____

Special events_____

Set up/Clean up for events_____

Baking for events_____

Tuition Fee Schedule:

1 Student = \$75

2 Students = 100

3 Students or more = \$110

First Reconciliation and First Eucharist - Add \$25 to tuition fee

Confirmation Candidates - Add \$25 to tuition fee

These extra fees are to help cover materials and retreat events.

Please mail this completed registration form with a check payable to St. Peter Church.

St. Peter Church .
P.O. Box 707
Higganum, Ct 06441

Faith Formation Office

Interim Coordinator of Religious Education- Carol Ann Keough

Email- FaithFormationSPCHigganum@gmail.com

Phone-860-345-8018 select option 2 to leave a message