

# Saint Joseph Faith Formation

## Registration Form 2024-2025

603-883-0757 x 4

janicemercure@stjoenash.org

FAMILY NAME: _____		Mother's Maiden Name: _____	
ADDRESS: _____			
CITY: _____	ZIP: _____	PHONE: ( ) _____ - _____	
E-Mail Address: _____			
Father: _____		Cell # _____	
Mother: _____		Cell # _____	

Name of Child	Grade	Baptism (Y/N)	First Reconciliation (Y/N)	Confirmation (Y/N)	First Communion (Y/N)

**SELECT A MASS PREFERENCE FOR YOUR FAMILY : SELECT ONLY ONE**

(Grades Kindergarten through Grade 5)

( ) Saturday 4:00 pm ( ) Sunday 8:00 am ( ) Sunday 10:00 am

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***Deadline for registration August 15<sup>th</sup>***

**Fee For Gift (Kindergarten -Grade 5)**

\$40.00	one child	\$ _____
\$80.00	two children	\$ _____
\$100.00	three or more children	\$ _____

**SACRAMENTAL FEES (in addition to tuition)**

\$10.00	extra for 1st Eucharist--Grade 3	\$ _____
\$20.00	extra for 1st Reconciliation--Grade 2	\$ _____
\$10.00	extra for -Confirmation I—Grade 3	\$ _____
\$20.00	extra for Confirmation II Grades4-12	\$ _____
\$10.00	Late Registration Fee after August 15th	\$ _____

TOTAL DUE \$ \_\_\_\_\_



Student- \_\_\_\_\_

Student \_\_\_\_\_

**Medical Forms**

If your child needs an epi-pen, inhaler or other medical equipment on hand during a session or event when a parent will not be present, please provide the Medical Release form prior to attending. Forms may be obtained at the Religious Education Office.

Does your child take any medication or have any physical or learning disabilities of which we should be aware ? Please note below.

\_\_\_\_\_  
\_\_\_\_\_

**Emergency Contact Information**

In the event of an emergency, whom should we contact first? \_\_\_Mom or \_\_\_Dad

If we are unable to reach you in an emergency, whom should we contact instead?

Name \_\_\_\_\_

Cell Phone \_\_\_\_\_

**Photograph Permission**

Photographs are sometimes taken during faith formation sessions and events. They are displayed publicly on parish website, on Facebook, on bulletin boards, etc. and used to keep the community aware and informed of parish events and activities.

I give permission for you to publicize photos of my child(ren) Parents Initials \_\_\_\_\_

I do not give permission for to publicize photos of my child(ren) Parents Initials \_\_\_\_\_