

St. Mary Help of Christians Faith Formation
 2016-2017 Family Registration PLEASE fill out both sides

Family _____ phone _____
 Last Name Parent(s) First Name(s) cell # _____
 Email _____

Address _____ City _____ Zip Code _____

Parent _____ phone _____
 Last Name (if different) First Name cell # _____

Address _____ City _____ Zip Code _____

Grades 1-10 \$45.00 per child (non-parishioners \$100.00 per child) Tuition

Child(ren) Grades 1-8

Name _____ Male/Female DOB _____ Grade _____

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Name _____ Male/Female DOB _____ Grade _____

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Name _____ Male/Female DOB _____ Grade _____

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Name _____ Male/Female DOB _____ Grade _____

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Confirmation 1st year-

Name _____ Male/Female DOB _____ Grade _____

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Confirmation 2nd year

- Name _____ Male/Female DOB _____ Grade _____

(must have completed 1st year requirements)

This child was Baptized- No Yes Year _____ Has received: 1st Reconciliation No Yes
 Place of Baptism _____ 1st Eucharist No Yes

Registering after August 31st Add \$10

Total amount Due.....

(Registration Forms can not be processed until payment is received)

*Children were in the classroom last year _____ *Children were not in the classroom last year _____
 (*please fill out section on back)

(Continued on back-please fill out both sides)

I/WE agree to support Faith Formation by participating in the following way:

- Serve as teacher Serve as teacher's full time assistant Assist with special events
- Help with students' prayer memorization (gr. 1-6) One to one tutoring
- Other gifts or talents you wish to offer: _____

Are there any special needs/allergies that we should be aware of? No Yes(Please explain)

Child-_____

Child-_____

*If your child was not in classes at SMHOC (school or Faith Formation) last year, please explain what program they were in

Tuition a problem? *Installments accepted, call the office for info 252-1799*

- *Tuition **FREE** for teachers & full time assistants (check here)_____ to be approved.
- *There are only a few positions still available- please check with Jan Minke

~~~ Interested in SCRIP? See Jan Minke

**Make checks payable to: St. Mary Help of Christians Church**

Drop off at Parish Office or please Mail to: **St. Mary HOC Faith Formation**  
*Clearly marked "Faith Formation"*    **24588 County Road 7**  
**St. Augusta, MN 56301**

**\*Office use only-** amount paid \_\_\_\_\_ cash    check # \_\_\_\_\_

Teaching/Assisting grade\_\_\_\_\_