

STACM FAMILY FORMATION REGISTRATION 2015/16

Father/ Guardian: _____

Religion (optional): _____

Mother/ Guardian: _____

Religion (optional): _____

Address: _____ **Postal Code:** _____

Telephone (Home): _____ **E-Mail:** _____

Marital Status (optional): Married ___ Single ___ Divorced ___ Common Law ___ Widowed ___

This information helps us to support both parent(s) and/or child/ren

Please indicate below the Sacraments each child has celebrated:

CHILDREN TO BE REGISTERED Full name of Each Child (as given in Baptism) Please underline the name child is called <i>(last name) (first) (middle)</i>	Child's Date of Birth	Grade in School Sept. /15	Level in Family Formation Program Sept. /15	Levels completed in Family Formation Program	Baptism	Reconciliation	Holy Communion
1.							
2.							
3.							
4.							

Special information of which we should be aware: (attendance, academic, medical, allergies, or behavioral concerns)

TURN OVER→

Registration Fee: \$60 per child or \$90 for 2 or more children

	Fee	Paid
Book for <u>Primary and Level 1</u>: "Joy, Joy the Mass": \$8.00	_____	_____
Books for <u>First Reconciliation and First Communion</u>: "Called to His Supper" & "Making Things Right": \$16.00	_____	_____
<u>Registration Fee</u>: \$60 per child or \$90 for 2 or more	_____	_____
	Total	_____

Please make cheques payable to STACM

Payment: Yes () No ()

**For children receiving First Communion this year: my child was baptized at _____ parish.*

***A copy of their baptism certificate is required for children preparing for First Communion and Reconciliation if they have not been baptized at St. Thomas Aquinas or at Canadian Martyrs.**