

2023-2024 FAITH FORMATION REGISTRATION FORM

BLESSED SACRAMENT CATHOLIC CHURCH, 210 5th Ave W, West Fargo North Dakota.

Kindergarten students must be in kindergarten in public or JP II Catholic school. Pre-school age children who are age 4 by July 31 will be considered depending on class size and teacher availability.

Registration Due Date: July 31, 2023

Parent(s) Name: _____

As a family we attend:

5:15 p.m. _____

8:30 a.m. _____

10:30 a.m. _____

Address: _____

For information sharing purposes, please share with us your current email:

Home Phone _____

Mom's Email _____

Cell Phone _____

Dad's Email _____

Parent and/or Guardian Information

Parent/Guardian Name	Relationship	Occupation	Business Phone/Ext.	Religion

Emergency Contact Information

Name of Contact	Relationship	Contact Address	Emergency Phone #
Remarks: _____			

Class Times: Preschool/Kindergarten, Sunday, 10:30 a.m. Grades 1-5, Wednesday 5:30 p.m.
Grades 6-12, Wednesday 7:00 p.m.

Sacraments Received

Student	Sex	Grade	School	Birth Date	Class Time	Sacraments Received				
						B	R	C	E	

THE FOLLOWING IS A LEGAL PERMISSION. PLEASE BE SURE TO READ IT BEFORE SIGNING.

In the event I cannot be reached for a medical emergency, I hereby give permission to the physician selected by the DFF/YM or his/her designee to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child(ren) as named above. I give permission to administer first aid for my child. Limitations/Allergies (use back of form)
 (Enter any limitation to the above permission, then sign below)

1. No. of students _____ x \$50.00 = _____
 (Maximum fee \$150.00)

2. TOTAL FEE

Enter \$0.00 if Catechist.

Office Worker/sub see Lucy _____

3. Balance due to be billed _____

 Signature of Parent/Guardian

 Date Signed