

# 2019-2020 FAITH FORMATION PRE-K-GRADE 5 & EDGE REGISTRATION FORM

All families registering for Faith Formation Programs ***must*** be registered with the parish.

**All Children will attend Mass with their parents. Children will be called forth for Children's Liturgy.**  
**GRADES PRE-K-KINDERGARTEN- CLASS WILL FOLLOW CHILDREN'S LITURGY**  
**GRADES 1<sup>st</sup>-5<sup>th</sup>- CLASS WILL FOLLOW AFTER THE 9:00 AM MASS (10:05AM)**  
**GRADES 6-8 CLASS TIME: 6:00 PM – 7:30 PM MONDAY (BI-MONTHLY)**

## CHURCH OF SAINT THOMAS MORE

6 MADBURY ROAD DURHAM, NH 03824  
 (603) 868-2666 x117 E-MAIL: [stmfaith@comcast.net](mailto:stmfaith@comcast.net)

Primary Contact: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Last Name First Name

Address: \_\_\_\_\_  
 Street Town/City State Zip Code

Email addresses: \_\_\_\_\_  
 (please print clearly and provide email addresses to use for program updates and cancellations)

Father's Name: \_\_\_\_\_ Home/cell phone numbers: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Home/cell phone numbers: \_\_\_\_\_

Emergency Contact (other than parent): \_\_\_\_\_ Home/cell phone numbers: \_\_\_\_\_

Emergency Contact's Relationship to family: \_\_\_\_\_

### STUDENT INFORMATION

First/Last Name (if family name is not the same)	M/F	Date of Birth	Grade in Sept. '19	Last grade of Religious Education	Sacraments RECEIVED check all that apply				Sacraments NEEDED check all that apply				Additional Information you would like us to know	
					Baptism	Eucharist	Reconciliation	Confirmation	Baptism	Eucharist	Reconciliation	Confirmation		

Name of school attending during this school year: \_\_\_\_\_

\_\_\_\_ As an obligation to my child's Faith Formation, I am committed to attending regular parent day/night activities (Y/N) offered periodically to strengthen my family's Life Long Formation.

#### **First Reconciliation and First Communion:**

Additional sacrament registration will take place later in the year for the home study preparation programs for First Reconciliation, and First Communion. The cost is \$30 for *each* sacrament, payable with this form.

**Reconciliation -2<sup>nd</sup> grade and Confirmation and Eucharist is completed during the 3<sup>rd</sup> grade.**

## Registration Fee Worksheet

<b>1<sup>st</sup> student</b>	<b>\$100.00</b>	\$ _____	<b>\$100 for first child enrolling in PreK – 8<sup>th</sup> grade Faith Formation.</b>
<b>2<sup>nd</sup> student</b>	<b>\$ 50.00</b>	\$ _____	<b>\$50 for second child enrolling in PreK – 8<sup>th</sup> grade Faith Formation.</b>
<b>Add'l student(s)</b>	<b>\$ 0.00</b>	\$ _____ 0.00	<b>No additional charge for third (or more) children in PreK – 8<sup>th</sup> .</b>
<b>Sacrament prep (varies)</b>		\$ _____	<b>\$30 per sacrament per child (i.e. 2 children prep for 2 sacraments = \$60).</b>
<b>Confirmation Retreat</b>		\$ _____	<b>\$30 for Confirmation Retreat is required prior to Sacrament</b>
<b>Teacher Credit</b>	<b>\$ -50.00</b>	\$ _____	<b><u>\$-50 if parent is volunteering to be a teacher or an aide.</u></b>
<b>Total owed Pre-K-8</b>		\$ _____	<b>Add previous lines</b>

The High School Youth Program has a separate fee structure (includes Confirmation) and is detailed on that registration form.

**Registration notes:**

- Checks should be made payable to: **St. Thomas More Church**
- Scholarship money is available for any families in need of financial assistance.  
Please indicate your request on the registration form or on a separate note.
- We accept donations in support of our religious education programs, including contributions toward financial aid Scholarships.

**Medical Forms:** Please list any special circumstances, needs, or allergies that the teacher should be made aware of. Also, please indicate if your child needs an epi-pen, inhaler, or other medical equipment on hand during class/event:

\_\_\_\_\_

\_\_\_\_\_

**Learning Needs:** Are there any special learning needs or other information that would be useful for the teacher to know about?

\_\_\_\_\_

\_\_\_\_\_

**MSFF (Edge) ONLY**

**Dismissal: Please check the following**

\_\_\_\_\_ **I give permission for my child to be dismissed to meet me outside the building**

\_\_\_\_\_ **I will come into the building to pick up my child**

\_\_\_\_\_ **I give permission for my child to walk home**

**Photograph Permission:**

Photographs are sometimes taken during Faith Formation sessions and events. They are displayed publicly; e.g., on the parish website, in the parish bulletin, in the newspaper, in a brochure, on bulletin boards, etc. and the pictures are also used to keep the community aware and informed of parish events and activities.

**If you do not want images taken and used as described, please send a written notice to that effect to the Faith Formation Director at the address on the heading of this form.**

**Volunteer Opportunities:**

Our Faith Formation program depends on all our parishioners. Please consider sharing your time and talent with us. Indicate below if you can help in any of these or if you would like more information about these opportunities:

**PreK-5 Opportunities:** \* Classroom Teacher or aide: \_\_\_\_\_ \* Hall Monitor (Sundays) \_\_\_\_\_ \* Special projects/events: \_\_\_\_\_

**MSFF (Edge) Grades 6-8 Opportunities:**

\* Christian Formation Core Team (meets once a month) \_\_\_\_\_ \* Snack Preparation: \_\_\_\_\_

\* Teaching Assistant: \_\_\_\_\_ \* Special Projects/Events: \_\_\_\_\_

**My signature below indicates that to the best of my knowledge the information on this form is accurate and true.**

\_\_\_\_\_  
Signature of Parent or Legal Guardian

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY**

Date Received: \_\_\_\_\_ Payment Received: \_\_\_\_\_ Payment type: \_\_\_\_\_ Balance Due: \_\_\_\_\_