

Family Registered in Parish?
 Y N
 If no, Where? _____
 Please Print Clearly

Faith Formation Registration

Holy Family Catholic Church
 P.O. Box 130
 Clemmons NC 27012
 Faith Formation 778-0600
 Peggy Schumacher ext. 214 or Gina Henry ext 205

2011-2012

Date: _____
 Fee Paid: _____
 Sac. Fee _____
 Health Form: _____
 Bapt. Cert.: _____

Family Name Street Address City/State Zip Home Phone

Fathers First Name Religion Work Phone Cell Phone

Mothers First Name Religion Work Phone Cell Phone

Emergency Contact Information Name Phone Relationship

Family e-mail secondary email

Names of children To be enrolled	M/F	Birth Date	School /grade '11-'12	Special Needs/Sacramental
			/	
			/	
			/	
			/	

For Pre-school please list age as of August 31

Please enter students first name in the appropriate space

**Pre-School
Sunday 9:15**

Pre-K3 _____
 Pre-K4 _____
 K _____

**Elementary
Wednesday 4:15-5:30**

Grade K _____
 Grade 1 _____
 Grade 2 _____ *

Grade 3 _____
 Grade 4 _____
 Grade 5 _____

**Elementary
Wednesday 6:15-7:30**

Grade K _____
 Grade 1 _____
 Grade 2 _____ *

Grade 3 _____
 Grade 4 _____
 Grade 5 _____

* Please note if your child is in 2nd grade and/or receiving First Eucharist this school year, an additional Sacramental fee of \$50.00 to cover other supplies needed for sacramental prep. This fee is not waived. Please provide a copy of the baptismal certificate; this is needed for all sacramental prep students.

Tuition: 1 - \$65 / 2 - \$125/ 3 - \$180/ 4 - \$225 student(s) (\$225 max.) *Sacramental Fee: \$50.00
(in addition to Tuition - which is not waived)

Please Note: Tuition is waived for catechists and 50% off for aides. Tuition will be confidentially waived for anyone expressing financial hardship.

Volunteer Needs: Catechist _____ Aide _____ Substitute _____
 Volunteer name(s): _____