

Our Lady of the Woods ~ St. Peter Chapel~ Faith Formation  
**2022-2023 Family Registration ~ Grades Pre-K thru 12th**



<b>Registration Fee:</b> \$50.00 for Family (Parents/Guardians & Children) \$15 for each additional student guide (optional)	<b>Additional Sacramental Fee:</b> \$30 per student (Reconciliation/Eucharist) \$30 per student (Confirmation) <b>*If new to Parish, include a copy of child's Baptismal Certificate*</b>
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~Please Print~

Family Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Father/Guardian's First & Last Name \_\_\_\_\_

Mother/Guardian's First & Last Name \_\_\_\_\_

Marital Status: \_\_\_\_\_ Married \_\_\_\_\_ Divorced \_\_\_\_\_ Separated \_\_\_\_\_ Widowed \_\_\_\_\_ Single

Child resides with: \_\_\_\_\_ Both Parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Other

Fathers' Cell Phone # \_\_\_\_\_ Mother's Cell Phone # \_\_\_\_\_

Good Email Address: \_\_\_\_\_

Father's Religion \_\_\_\_\_ Mother's Religion \_\_\_\_\_

**1st Child's Information:** \_\_\_\_\_ New Registration

Child's Name: \_\_\_\_\_ Allergies? \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Date of Baptism \_\_\_\_\_ 1st Reconciliation? Yes \_\_\_\_\_ No \_\_\_\_\_

1st Eucharist? Yes \_\_\_\_\_ No \_\_\_\_\_ Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_

Register this child for:

Pre-K 3-4: \_\_\_\_\_

Family of Faith K-5th \_\_\_\_\_ Sacraments: 2nd Grade (Reconciliation/Eucharist) \_\_\_\_\_

Youth Group (grades 6th-12th) \_\_\_\_\_ Grade: \_\_\_\_\_ 2 year Confirmation prep (7th-8th Grade) \_\_\_\_\_

**Please fill out front and back of this registration form. Thank you!**

**2nd Child's Information:** \_\_\_\_\_ New Registration

Child's Name: \_\_\_\_\_ Allergies? \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Date of Baptism \_\_\_\_\_ 1st Reconciliation? Yes \_\_\_\_\_ No \_\_\_\_\_

1st Eucharist? Yes \_\_\_\_\_ No \_\_\_\_\_ Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_

Register this child for:

Pre-K 3-4: \_\_\_\_\_

Family of Faith K-5th \_\_\_\_\_ Sacraments: 2nd Grade (Reconciliation/Eucharist) \_\_\_\_\_

Youth Group (grades 6th-12th) \_\_\_\_\_ Grade: \_\_\_\_\_ 2 year Confirmation prep (7th-8th Grade) \_\_\_\_\_

**3rd Child's Information:** \_\_\_\_\_ New Registration

Child's Name: \_\_\_\_\_ Allergies? \_\_\_\_\_

Gender \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade \_\_\_\_\_

Date of Baptism \_\_\_\_\_ 1st Reconciliation? Yes \_\_\_\_\_ No \_\_\_\_\_

1st Eucharist? Yes \_\_\_\_\_ No \_\_\_\_\_ Confirmation? Yes \_\_\_\_\_ No \_\_\_\_\_

Register this child for:

Pre-K 3-4: \_\_\_\_\_

Family of Faith K-5th \_\_\_\_\_ Sacraments: 2nd Grade (Reconciliation/Eucharist) \_\_\_\_\_

Youth Group (grades 6th-12th) \_\_\_\_\_ Grade: \_\_\_\_\_ 2 year Confirmation prep (7th-8th Grade) \_\_\_\_\_

**\*\*\* Are there any health issues or other concerns/needs that your child/children has? \*\*\***

Please note by the child's name as well as any other concerns you might want to share with us.. Thank You!

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I authorize the following to sign my child(ren) in/out of Formation if I am not available:

\_\_\_\_\_

Relationship: \_\_\_\_\_

Date: \_\_\_\_\_ Signature \_\_\_\_\_

**PHOTO and LIABILITY RELEASE FORM**

I hereby give permission for my child(ren), \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, to be photographed, or videoed for Church-related activities and celebrations, such as preparation or reception of Sacraments, etc.

I waive, release, and indemnify the released parties as identified above from all claims or liability which have arisen or which may arise from the Parish activity which involves any damage, loss or injury to me or to my children or to my personal property.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_