

ST. JOSEP FAITH FORMATION

REGISTRATION FORM



OFFICE USE ONLY
Date Received:
Check #:
Cash:
Is Receipt Required:

PLEASE PRINT ALL INFORMATION PROVIDED

REGISTRATION

DATE: _____

GRADE LEVEL UPON ENTERING:

Years 1, 2 (First Eucharist/First Reconciliation), 3, 4, 5, 6, 7, 8 and 9 (Confirmation).

Registration Fee: \$20.00

All materials needed for the year is included in the fee.

If the fee cannot be paid due to financial burden, please contact me at the office 902-625-1264. No child will be denied!



Sharing images of our faith in action is an important part of living our role of disciples and building our faith community. At the same time, we the Diocese of Antigonish and St. Joseph Parish are committed to the protection of privacy for individuals. Please take the time to sign our consent form.

Do you give consent for your child to have his or her picture/videos taken during parish and Diocesan events to be shared? If so please sign below

Parent Name: Please Print _____

Parent Signature & Date _____

CHILD'S PERSONAL INFORMATION

CHILD'S SURNAME: _____

FIRST NAME: _____

MIDDLE NAME: _____

Home Address: _____

DATE OF BIRTH:

YYYY	MONTH	DAY

****DOES YOUR CHILD HAVE ANY MEDICAL CONDITIONS WE SHOULD BE AWARE OF?**

EMERGENCY CONTACT IF PARENTS CANNOT BE CONTACTED AND PHONE #

LAST NAME: _____
FIRST NAME: _____
PHONE # _____

PLEASE CHECK THE SACRAMENT YOUR CHILD HAS RECEIVED

- BAPTISM
- FIRST COMMUNION
- FIRST RECONCILIATION
- CONFIRMATION

WHAT PARISH WAS YOUR CHILD BAPTIZED AT?

PARISH: _____
ADDRESS: _____
YEAR: _____

****** We kindly ask that parents or caregivers provide a copy of their child's baptismal certificate if their child will be receiving the sacrament of First Eucharist or Confirmation this year. The Church requires proof of baptism before a child can receive their sacrament, so this document is very important. If we do not have a baptism certificate on file, your child will unfortunately not be able to take participate in the sacrament celebration. If your unable to locate your child's certificate, please contact the parish where your child was baptized. They will be happy to provide a copy for you.**

If your child was baptized at St. Joseph Port Hawkesbury, we would have a copy on hand already. Just provide the year of when they were baptized.

MOTHER'S INFORMATION

MOTHER'S FULL NAME: _____
MOTHER'S HOME PHONE : _____
MOTHER'S CELL PHONE: _____
MOTHER'S EMAIL ADDRESS _____

If you have Facebook, please provide your name to be added on our private parent page. We post lost of important information on this platform as well.

FATHER'S INFORMATION

FATHER'S FULL NAME: _____

FATHER'S HOME PHONE: _____

FATHER'S CELL PHONE: _____

FATHER'S EMAIL ADDRESS _____

If you have Facebook, please share your name to be added on our private parent page.

CUSTODY OR GUARDIANSHIP

CHILD PRIMARY LIVES WITH?

e.g., Mother, Father, Legal Guardian, Stepmother, Stepfather, other (specify) with phone #

ST. JOSEPH FAITH FORMATION OFFICE INFORMATION

EMAIL ADDRESS:

stjoereled@gmail.com

PHONE #:

902-625-1264

FACEBOOK:

St. Joseph Faith Formation (can be found under my name: Nancy Day)

CANCELLATION POLICY



If school is cancelled, we are also cancelled. Please check 101.5 the Hawk, our private Facebook page and an email will be sent to parents.