

# ST. PATRICK 2020-2021 REGISTRATION

## K – 8<sup>TH</sup> GRADE FAITH FORMATION

OFFICE USE ONLY: New Family: \_\_\_ Paid: Online: \_\_\_ Check \_\_\_  
 1<sup>st</sup> Communion/Grade: \_\_\_\_\_  
 Confirmation/Grade: \_\_\_\_\_

This form is for registering a family in K-6 Family Formation (FF) and/or a 7<sup>th</sup>-8<sup>th</sup> grader in Coming Together Nights (CTN). Please complete the form and return with your financial commitment before the **close of registration on Sept. 18, 2020**.

Family Last Name: \_\_\_\_\_ Primary Email: \_\_\_\_\_

Attended Faith Formation at St. Patrick in 2019-2020? ( ) Yes ( ) No  
**If NO, copies of Baptismal certificates for all K-8<sup>th</sup> children need to be on file at the parish office for your registration to be completed. If your child is to receive a sacrament this year and you have answered NO to the above question, you will need to provide proof of attendance in a religious education program last year.**

MOTHER'S NAME: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Religion: \_\_\_\_\_

FATHER'S NAME: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Religion: \_\_\_\_\_

Sacrament	Mother	Father
Baptism		
Communion		
Confirmation		

Child(ren) live with:  
 Both parents  
 Mother  Father  
 Other \_\_\_\_\_

Grade Sept 2020	Child's Name (Include Last Name if different than parent)	M/F	Date of Birth	Baptism Date/Place	First Communion Date/Place	School Attending	Allergies

If registering a K-6<sup>th</sup> child(ren) in FF, please list parent(s) which will attend the monthly meeting: \_\_\_\_\_

PHOTO PERMISSION: Occasionally, video and still photographs may be taken throughout the year and used to promote our programs. Children in the photos/videos will never be identified by name. This authorization constitutes permission for my child(ren) to be photographed.

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

PLEASE NOTE: If you do not wish your child to be included in the photos, please instruct your child to move away from the photographer. When filming group action shots, it's impossible for us to know which children should not be photographed.

### MEDICAL TREATMENT AUTHORIZATION

Doctor's name \_\_\_\_\_ Phone: \_\_\_\_\_

Preferred Hospital \_\_\_\_\_

In the event that my child needs to be transported to a hospital and I cannot be reached, I authorize Saint Patrick Parish employees to take necessary steps so that medical treatment can be rendered quickly. In consideration for making these decisions in my absence, I hereby release and hold harmless the Saint Patrick Parish, the Faith Formation Program, its employees, appointees, and/or volunteers from any liabilities for the events that could occur as a result of this emergency situation. I also consent to my child receiving any medical treatment deemed necessary by the examining physician.

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

\_\_\_\_\_  
Relationship

\_\_\_\_\_  
Date

Please Note:

- Copies of baptismal certificates for all registered children must be on file in the Faith Formation office.
- Two consecutive years of Faith Formation is required for a child to be eligible to receive a sacrament (Reconciliation, 1<sup>st</sup> Communion, or Confirmation), per the Diocese of Joliet. If this is the first year in our program, proof of attendance in a religious education program last year must be provided.

My child(ren), \_\_\_\_\_, will be eligible for a sacrament this year.

- Attach written communication, if necessary, for any Special/Learning Needs or medical conditions we need to be aware of.

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### **Financial Commitment for K-8 Faith Formation**

Registration in FCFF and/or CTN - \$25 per family \_\_\_\_\_

Donation to Faith Formation \_\_\_\_\_

TOTAL: \_\_\_\_\_

Check # \_\_\_\_\_ Online (Date/Amount) \_\_\_\_\_

Payment is due at time of registration. Please make checks payable to "St. Patrick's" with "Faith Formation" in the memo line. Send checks with registration form to "St. Patrick Catholic Church, 406 Walnut St., Yorkville, IL. 60560" or place in envelope and drop in secure box located by sidewalk outside parish center doors. Credit card payments are also accepted at [www.stpatrickyorkville.org](http://www.stpatrickyorkville.org) by clicking the Online Giving and choosing "Faith Formation Commitment - (2020/2021)".