**** Faith Formation Registration Form *Registration Date:*

 2021-2022 **7/17/21**

**Parents: Please review the following program guidelines, sign and date the agreement.**

**Parental Program Agreement**

* **Families must be registered parishioners of St. Bernadette. (If you’re uncertain, contact** **bus.mgr@stbnc.net** **or 919-552-8758 ext 205)**
* Parents and children are required to actively participate in the Liturgy each weekend & Holy Days.
* We encourage families to volunteer in one of our parish ministries offering your service to the Church.
* Consistent in-person classroom attendance is required. Child is permitted to miss three (3) class sessions otherwise, the child is to repeat the class.
* Wi-Fi access is required. Parent must have a valid email and phone number.
* Accept Google Classroom invite. Parents are responsible to actively communicate with catechists, the Faith Formation office, and monitor their child’s progress.
* Use your child’s full name as the identification in Google Classroom.
* Middle/high school youth are not to use gamer ID’s, they must use their full name.
* Payment of the registration fee is expected in full at the time of registration.
* Parents are required to assist in Faith Formation as needed in the classroom, service projects, or socials.

**We have read the requirements listed above and our family has agreed to follow them.**

|  |  |  |
| --- | --- | --- |
| Parent Name        | Signature        | Date      *m/d/yy* |

Family Information – Please print clearly

|  |  |  |
| --- | --- | --- |
| [ ]  Father  | Last Name       | First Name       |
| Phone       | Email       |
| [ ]  Mother  | Last Name       | First Name       |
| Phone       | Email            |
| Address                  | City        |
|  | Zip       |

Student Information

|  |  |  |
| --- | --- | --- |
| Last name  | First Name  | Date of Birth       *m/d/yy* |
| School grade *as of Aug 2021*     | Email       | Phone       |

**Medical Condition/Learning Difference** *Disclosed information kept confidential*

|  |
| --- |
| Food or other allergies       |
| Medical Condition(s)       | Is medication needed during Faith Formation [ ]  Yes [ ]  No |
| If Yes, list medications       |
| Learning Differences       |

**Student Sacraments** *Check box and include date of Sacrament If student is not baptized, please contact the Baptism Coordinator at 919-552-8758 x212*

|  |
| --- |
| Is child baptized? [ ]  Yes [ ]  No |
| [ ]  Baptism Date      *m/d/yy* | Church name       |
| *Baptismal certificate is required at Registration.* | Address       | City        |
| State    Zip       | Country       |
| [ ] First CommunionDate       *m/d/yy* | Church name       |
|  | Address       | City        |
| State    Zip       | Country       |

2020-2021 Program

|  |
| --- |
| Did the child participate in the Faith Formation in 2020-2021? [ ]  Yes [ ]  No |
| If Yes, were they in [ ]  First Communion Prep Class  | [ ]  Year 1  |  |
|  [ ]  High School Confirmation  | [ ]  Year 1  |  |

2021-2022 Program – REGISTRATION CLOSES ON SEPTEMBER 2 at 5:00PM

|  |
| --- |
| ***Check the appropriate grade and preference for class days/times.*** |
| Elementary Grade [ ]  1 [ ]  2 [ ]  3 [ ]  4 [ ]  5  | Tuesdays | [ ]  5:00 – 6:00PM  | [ ]  6:30 – 7:30PM |
| Elementary Grade [ ]  4 [ ]  5  | Wednesdays  | [ ]  5:00 – 6:00PM  | [ ]  6:30 – 7:30PM |
| Elementary Grade [ ]  1 [ ]  2 [ ]  3  | Thursdays | [ ]  5:00 – 6:00PM  |  |
| Middle School [ ]  6 [ ]  7 [ ]  8  | Wednesdays  | [ ]  5:00 – 6:10PM  | [ ]  6:15 – 7:30PM |
| High School [ ]  Year 1 [ ]  Year 2  [ ]  Year 3 (student did not complete Year 2)  | **Only on Sundays** at 6:15 – 7:30PM |

Program Fees

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Program** |  | **Sacrament fee, if applicable** | **Add** | **Total** |
| Elementary or Middle School | $60 | First Reconciliation & First Communion in 2022 | $30 | $90 |
| High School Confirmation Year 1  | $90 |  |  | $90 |
| High School Confirmation Year 2 or Year 3 | $90 | Confirmation | $30 | $120 |
| Family cap excluding Sacrament fee | $150 |  |  |  |

**For example, the Program for 1 child is $60. If they will receive a sacrament, then add $30, total is $90.**

**Please email this form to both of these email addresses** **bus.mgr@stbnc.net** **and** **dre@stbnc.net**

*For office use only:*

|  |  |  |
| --- | --- | --- |
| *Registration Date:* | *Receipt #:* | *# Children registered:* |
| *Amount Due:* | *Amount Received:* | *[ ]  Cash* *[ ]  Check* *[ ]  Credit/Debit* |
| *Family ID#* | *Student ID#* | *Balance Due:* |
| *Payment received by: Check #:* |
| *Comments/Notes:* |