

# St. Francis Borgia Children's Faith Formation

225 Cedar St. Washington, MO 63090 636-239-6701 x1277

*We need this form filled out for every child in the family*

## Payment

Date \_\_\_\_\_ Amount \_\_\_\_\_  
Cash \_\_\_\_\_ Check# \_\_\_\_\_



### The goals of our Children's Faith Formation:

- To be a Christ-centered ministry that in collaboration with parents will form young missionary disciples of Jesus Christ
- To develop the sense of a loving, caring, praying community among children and their parents;
- To lead children and their parents in a deepening self-awareness and faith commitment;
- To guide them to find a faith that is alive and active and permeates all of life.

## STUDENT INFORMATION

Child's Name: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Who does this child live with? \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
Full Time School Attending in Fall 2026 \_\_\_\_\_ Grade \_\_\_\_\_

## PARENT OR GUARDIAN INFORMATION

Father's Name \_\_\_\_\_  
Religion \_\_\_\_\_ Marital Status \_\_\_\_\_  
Address if other than what is listed for the child above  
\_\_\_\_\_  
Email Address \_\_\_\_\_  
Phone # \_\_\_\_\_

Mother's Name \_\_\_\_\_ Maiden Name \_\_\_\_\_  
Religion \_\_\_\_\_ Marital Status \_\_\_\_\_  
Address if other than what is listed for the child above  
\_\_\_\_\_  
Email Address \_\_\_\_\_  
Phone# \_\_\_\_\_

## EMERGENCY CONTACT INFORMATION

Emergency contact name: \_\_\_\_\_  
Relationship to child: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## MEDICAL & ACADEMIC INFORMATION

Does this child have any allergies?  Yes  No

If yes, please list them: \_\_\_\_\_

Does this child have any medical conditions we should be aware of?  Yes  No

If yes, please specify: \_\_\_\_\_

Does this child receive an special interventions at their school?  Yes  No

If yes, please describe the help provided \_\_\_\_\_

In case of a serious accident or serious illness, I request St. Francis Borgia contact me. If it is impossible to contact me, St. Francis Borgia may make the appropriate arrangements for the care of my child.

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



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*(Only one form needed per family)*

## Parent Christian Witness Statement

As a parent, I am aware that my child's first and foremost religious instruction comes from the home and that my own attitudes, actions, values, and beliefs greatly contribute to his/her growth in faith. Further, I realize that I can give witness to my child by attending Sunday Mass and taking an active part in parish life, thereby demonstrating the beauty of living the faith.

By enrolling my child(ren) \_\_\_\_\_

in St. Francis Borgia Children's Faith Formation, I am expressing my willingness to cooperate with the administration and my child's teacher in their efforts to nurture his/her faith development. I understand that my specific responsibilities include those relating to the following policies:

- Attendance at Mass – Some of what the students learn centers around our celebration at Mass. Attending Mass with your children on Sundays and Holy Days reinforces what the catechists are teaching as well as spiritually enriches your children to be more open to what they hear in class.
- That I will encourage my children to take an active role in their church and parish in any capacity allotted to them at their age.
- Attendance at Class - Because religion classes meet only once weekly, two absences require that the child make up lessons according to the teacher's requirements in order to proceed to the next class level. This is especially critical during sacramental preparation years.
- Behavior - Cooperation and respect in the classroom are vital to a Christian environment. Consistent behavioral problems that cannot be resolved may result in the child's exclusion from our program.
- Assignments - The child's assignments frequently extend to interaction within the family setting. Parental interest and support are necessary components of the child's successfully completing these assignments.
- Sacramental Preparation - Because continual faith development includes certain understanding of specific elements of that faith and a readiness to participate in the church's sacramental life, a child will not be accepted into the sacramental program (Reconciliation & Eucharist and Confirmation) without some religious training. At least one parent must attend the meeting with their child provided to give parents an overview of the program in place.
- Family Life – Education in Theology of the Body is a component of the Faith Formation Program at St. Francis Borgia Parish.
- That I acknowledge and accept my financial responsibility to support my parish, the Pastor and the Children's Faith Formation.

I support these policies and desire to cooperate in my child's religious education at St. Francis Borgia Children's Faith Formation

Please sign and return with your registration form.

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

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_



ARCHDIOCESE OF ST. LOUIS

Office of Communications and Planning

**MEDIA AUTHORIZATION**

*(Only one form needed per family)*

**Introduction**

For marketing and publicity purposes, there may be times when the school/parish/archdiocese wishes to use your and/or your child(ren)'s image, name, recording, or academic work in various media for marketing and/or publicity purposes. As parent, you may choose the appropriate level(s) of authorization. For your convenience, this one form covers all members of your family at the same school.

→Please check either "Yes" or "No" to all four areas of authorization

**LEVELS OF AUTHORIZATION:**

**PARISH / SCHOOL:** I grant permission to use my or my child's image, name, recording, or academic work in communications that include, but are not limited to, parish bulletin, school newsletter, student newspaper, admission videos, parish/school website and social media.

→ Yes \_\_\_\_\_ No \_\_\_\_\_

**ARCHDIOCESE OF ST. LOUIS:** I grant permission to use my or my child's image, name, recording, or academic work in communications that include, but are not limited to, archstl.org, St. Louis Review, Catholic St. Louis magazine, archdiocesan social media, The e-Vangelizer (newsletter published by the Catholic Education Office) and any publication(s) by agencies administered by the Archdiocese of St. Louis.

→ Yes \_\_\_\_\_ No \_\_\_\_\_

**SPONSORING ORGANIZATIONS:** I grant permission to use my or my child's image, name, recording, or academic work in websites, videos, and publications created by independent foundations and corporations that support Catholic education but are not legally connected to the Archdiocese of St. Louis, including, but not limited to, Today and Tomorrow Educational Foundation, Roman Catholic Foundation of Eastern Missouri, Access Academies, English Tutoring Project, and United Way.

→ Yes \_\_\_\_\_ No \_\_\_\_\_

**SECULAR MEDIA OUTLETS:** I grant permission to use my or my child's image, name, recording, or academic work in secular media communications including, but not limited to, print, radio, TV and internet (Examples: St. Louis Post-Dispatch KMOX radio, KSDK-TV and Catholic Family Magazine)

→ Yes \_\_\_\_\_ No \_\_\_\_\_

**FAMILY AUTHORIZATION (Please print clearly.)**

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

Phone: \_\_\_\_\_

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

School Name: \_\_\_\_\_

Parish Affiliation \_\_\_\_\_

Parent 1 Name: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_

Child(ren)'s Name(s) \_\_\_\_\_

Grade \_\_\_\_\_

Age \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent/Legal Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## STUDENT SACRAMENT INFORMATION

*Only for new students registering for the first time*

Please present a copy of your child's baptismal certificate when registering a child for the first time

Child's Name \_\_\_\_\_

Has your child previously attended religious education classes? Yes \_\_\_\_\_ No \_\_\_\_\_

How many years of instruction? \_\_\_\_\_ Where? \_\_\_\_\_

Is your family a registered member of St. Francis Borgia Parish? Yes \_\_\_\_\_ No \_\_\_\_\_

Baptism:

Date \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

First Reconciliation:

Date \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_

First Communion:

Date \_\_\_\_\_

Church: \_\_\_\_\_

Address: \_\_\_\_\_

City, State & Zip Code: \_\_\_\_\_