

Blessed Sacrament Church

Registration for Faith Formation 2025/2026

Please print clearly

Family Last Name(s): _____

Father's first Name _____ Mother's first Name _____

Address: _____

Cell Phone #: Dad _____ Mom _____

Email:(print clearly) _____

1. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes__ no__ 1st Reconciliation: yes__ no__ 1st Communion: yes__ no__

2. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes__ no__ 1st Reconciliation: yes__ no__ 1st Communion: yes__ no__

(Additional children can be listed on the back of this form)

Cost: \$50.00 for the first child and \$25.00 for the second child in the family, and \$10 per student beginning with third child. (No child is turned away due to lack of fees.) They still must be **registered** with the program in order to attend classes. Please notify the parish office or the Religious Education Director if you will be unable to pay.

****Signature:** _____

(For office use only.)

Registration Date: _____ Amount paid: _____ cash _____ check # _____

Received by: _____

3. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes___ no___ 1st Reconciliation: yes___ no___ 1st Communion: yes___ no___

4. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes___ no___ 1st Reconciliation: yes___ no___ 1st Communion: yes___ no___

5. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes___ no___ 1st Reconciliation: yes___ no___ 1st Communion: yes___ no___

6. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes___ no___ 1st Reconciliation: yes___ no___ 1st Communion: yes___ no___

7. Student Name: _____ Entering Grade _____

Date of Birth: ____/____/____

Baptized: yes___ no___ 1st Reconciliation: yes___ no___ 1st Communion: yes___ no___

