FAMILY INFORMATION

Student # 1

Student # 2

Follow on: INSTAGRAM

St Andrew Faith Formation	PARENT INVOLVEMENT			
1400 Inglewood	Catechist (Registration Fee waived) Aide			
Rochester, Michigan 48307				
248-651-6571	Substitute			
	Office Help			
Follow on: INSTAGRAM@STANDREWFAITHFORMATION	Donation	Donation		
AMILY INFORMATION				
Family Last Name:	Best Phone #			
Father's Name: Mother's N	ame			
Address: City:	Zip:			
Best E-mail Address:				
Emergency Contact:	_Phone #			
tudent # 1				
Child's Name:				
Birth Date:	Catholic Baptism	Yes	_ No	
Grade/School	Eucharist	Yes	_ No _	
Day: Sunday: 10:00 AM (K only) Sunday: 6:00 P	M (middle school only)			
Monday: 4:30 PM (grades 1-5) 6:00 PM (grades 1-	8)			
Tuesday: 4:30 PM (grades 1-5) 6:00 PM (grades 1-	-5)			
Media Release: During the course of the year photo's, vide FACEBOOK page. I give permission for my child to be photo				
Special Needs (Medical, Learning Challenges, Physical Chal	lenges etc.)			
tudent # 2				
Child's Name:				
Birth Date:	Catholic Baptism	Yes	No _	
Grade/School	Eucharist	Yes	No	
Day: Sunday: 10:00 AM (K only) Sunday: 6:00	OPM (middle school only)			

Monday: 4:30 PM (grades 1-5) _____ 6:00 PM (grades 1-8) _____

Tuesday: 4:30 PM (grades 1-5) ____ 6:00 PM (grades 1-5) ____

Media Release: During the course of the year photo's, videos may be taken for use in the parish bulletin, website, FACEBOOK page. I give permission for my child to be photographed and used for parish purposes.

Special Needs (Medical, Learning Challenges, Physical Challenges etc.)

Student # 3					
Child's Name:					
Birth Date:	Catholic Baptism	Yes	_ No_		
Grade/School	Eucharist	Yes	No _		
Day: Sunday: 10:00 AM (K only) Sunday: 6:00 PM (middle school only)					
Monday: 4:30 PM (grades 1-5) 6:00 PM (grades 1-8)					
Tuesday: 4:30 PM (grades 1-5) 6:00 PM (grades 1-5)					
FACEBOOK page. I give permission for my child to be photoge Special Needs (Medical, Learning Challenges, Physical Challer		ses			
Special Needs (Medical, Learning Challenges, Physical Challer	nges etc.)				
Special Needs (Medical, Learning Challenges, Physical Challer	nges etc.)				
Special Needs (Medical, Learning Challenges, Physical Challer Student # 4 Child's Name:	nges etc.)		No _		
Special Needs (Medical, Learning Challenges, Physical Challer	nges etc.) Catholic Baptism Eucharist	Yes	No _		
Special Needs (Medical, Learning Challenges, Physical Challer	Catholic Baptism Eucharist (middle school only)	Yes	No _		
Special Needs (Medical, Learning Challenges, Physical Challer	Catholic Baptism Eucharist (middle school only)	Yes	No _		
Special Needs (Medical, Learning Challenges, Physical Challer Student # 4 Child's Name: Birth Date: Grade/School Day: Sunday: 10:00 AM (K only) Sunday: 4:30 PM (grades 1-5) 6:00 PM (grades 1-8)	Catholic Baptism Eucharist (middle school only) may be taken for use in the paris	Yes Yes h bulletin, w	No _ No _		

REGISTRATION FEES:	OFFICE USE:
1 child \$120	Date Received:
Family \$160	
Kindergarten Only \$60	Payment: CheckCash Credit Card
Out of Family of Parishes additional \$200	Data Duana da
Checks made payable to St. Andrew	Date Processed:
Mail form & payment to St Andrew (address at top of page)	Classroom assignment
To pay by Credit Card Follow link to Donation Page	
https://tithe.ly/give/?c=5964752	
Use Faith Formation in Drop Down menu under Donation	
Email completed form to: <u>Imartens@standrewchurch.org</u>	
New Communication Platform: Evangelus/Diocesan	
More details on information page	