

**1st-5th Faith Formation Registration Form 2018-2019**

**Must be a registered member of St. Timothy before you can register. Date:** \_\_\_\_\_  
**If registering for the first time please attach copy of Baptism certificate. \$5 discount per child if paid by June 1<sup>st</sup>.**

<b>Family Last Name:</b>	<b>Envelope #:</b>	<b>Best Phone:</b>
<b>Best Email:</b>	<b>Child(ren) live with:</b> <input type="checkbox"/> Both Parents <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Guardian (Name: _____)	
<b>Street Address:</b>	<b>City:</b>	<b>State:</b> <b>Zip:</b>
<b>Father's Name:</b>	<b>Father's Cell:</b>	
<b>Mother's Name:</b>	<b>Mother's Cell:</b>	
<b>Emergency Contact Name:</b>	<b>Emergency Contact Phone Number:</b>	
<b>Participant Information</b>	<b>Sacramental Information</b>	
<b>Name of Child #1:</b>	<b>Baptism Information:</b>	
<b>Birthdate:</b> <b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Please check appropriate box below</b>	
<b>Enrolled in Catholic School:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	If not baptized Catholic call the Faith Formation office at 813-961-1716	
<b>Name of Catholic School:</b>	<input type="checkbox"/> My Child NEEDS BAPTISM	
<b>Attended Catholic Faith Formation Classes Before:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Baptized at St. Timothy's _____ <span style="margin-left: 150px;">Date</span>	
<b>If yes, last grade completed &amp; Name of Parish/Catholic School:</b>	<input type="checkbox"/> Baptized in another Catholic Church: _____ <span style="margin-left: 150px;">Name of church</span>	
<b>Grade Level (Fall 2018):</b>	<input type="checkbox"/> Baptized, Not Catholic: _____ <span style="margin-left: 150px;">Religion</span>	
<b>Register Child for:</b> Classes are an hour and 15 min with the exception of First Holy Communion (FHC) which is an hour & 30 min.	<b>First Communion Information:</b>	
Sunday 10:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> Special Needs (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	For your child to receive First Communion this year (2019) they must have attended Catholic Faith Formation the previous year (2017-2018) or attended Catholic School. <b>Please attach Catholic Baptismal certificate.</b>	
Monday 4:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	<b>My child needs, this year:</b>	
RCIA (Check with office): <input type="checkbox"/> (\$100)	First Holy Communion: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>What should we know about your child (allergies, medical, behavioral or physical conditions; special needs):</b>		

Office Use Only		Date:	
1-5 Faith Form (\$60) _____	FHC yr. (\$100) _____	MS Edge (\$60) _____	HS Life Teen (\$60) _____
Cath. Sch. FHC yr. (\$50) _____	RCIA 1-5 & Yth (\$100) _____	Confirmation Yr. (\$100) _____	Cath. Sch. Confirm Only (\$50) _____
<input type="checkbox"/> Early Regist. Discount: _____	<input type="checkbox"/> Catechist Discount: _____	Check #: _____ Cash: _____ Charge: _____	Total Amount Due: _____ <b>Balance Due:</b> _____

Participant Information	Sacramental Information
<b>Name of Child #2:</b>	<b>Baptism Information:</b>
<b>Birthdate:</b> _____ <b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Please check appropriate box below</b>
<b>Enrolled in Catholic School:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	If not baptized Catholic call the Faith Formation office at 813-961-1716
<b>Name of Catholic School:</b>	<input type="checkbox"/> My Child NEEDS BAPTISM
<b>Attended Catholic Faith Formation Classes Before:</b>	<input type="checkbox"/> Baptized at St. Timothy's _____ Date
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Baptized in another Catholic Church: _____ Name of church
<b>If yes, last grade completed &amp; Name of Parish/Catholic School:</b>	<input type="checkbox"/> Baptized, Not Catholic: _____ Religion
<b>Grade Level (Fall 2018):</b>	<b>First Communion Information:</b>
<b>Register Child for:</b>	For your child to receive First Communion this year (2019) they must have attended Catholic Faith Formation the previous year (2017-2018) or attended Catholic School. <b>Please attach Catholic Baptismal certificate.</b>
Classes are an hour and 15 min with the exception of First Holy Communion (FHC) which is an hour & 30 min.	<b>My child needs, this year:</b>
Sunday 10:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> Special Needs (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	First Holy Communion: <input type="checkbox"/> Yes <input type="checkbox"/> No
Monday 4:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	
RCIA (Check with office): <input type="checkbox"/> (\$100)	

**What should we know about your child (allergies, medical, behavioral or physical conditions; special needs):**

Participant Information	Sacramental Information
<b>Name of Child #3:</b>	<b>Baptism Information:</b>
<b>Birthdate:</b> _____ <b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Please check appropriate box below</b>
<b>Enrolled in Catholic School:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	If not baptized Catholic call the Faith Formation office at 813-961-1716
<b>Name of Catholic School:</b>	<input type="checkbox"/> My Child NEEDS BAPTISM
<b>Attended Catholic Faith Formation Classes Before:</b>	<input type="checkbox"/> Baptized at St. Timothy's _____ Date
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Baptized in another Catholic Church: _____ Name of church
<b>If yes, last grade completed &amp; Name of Parish/Catholic School:</b>	<input type="checkbox"/> Baptized, Not Catholic: _____ Religion
<b>Grade Level (Fall 2018):</b>	<b>First Communion Information:</b>
<b>Register Child for:</b>	For your child to receive First Communion this year (2019) they must have attended Catholic Faith Formation the previous year (2017-2018) or attended Catholic School. <b>Please attach Catholic Baptismal certificate.</b>
Classes are an hour and 15 min with the exception of First Holy Communion (FHC) which is an hour & 30 min.	<b>My child needs, this year:</b>
Sunday 10:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> <input type="checkbox"/> Special Needs (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	First Holy Communion: <input type="checkbox"/> Yes <input type="checkbox"/> No
Monday 4:30 <input type="checkbox"/> 1 <sup>st</sup> <input type="checkbox"/> 3 <sup>rd</sup> <input type="checkbox"/> 4 <sup>th</sup> <input type="checkbox"/> 5 <sup>th</sup> (\$60) <input type="checkbox"/> FHC (\$100/\$50 Catholic School)	
RCIA (Check with office): <input type="checkbox"/> (\$100)	

**What should we know about your child (allergies, medical, behavioral or physical conditions; special needs):**



## Promotional Media Release

During the Faith Formation Program Year, \_\_\_\_\_ may participate

(Child's Name)

in videotape, motion picture, audio recording or still photograph productions that involve the use of students' names, likenesses or voices. Such productions may be used for educational or exhibition

purposes by St. Timothy Catholic Church in perpetuity and may be copied, copyrighted, edited and

(Parish Name)

distributed by St. Timothy Catholic Church in perpetuity unless said consent is revoked in writing.

(Parish Name)

News media, including representatives of television, radio, newspapers and magazines, also often are permitted on parish property and may take notes, still, photos, sound recordings and/or moving pictures that may include your child. These items may appear or be used in news or feature stories by print, television or radio media.

You have the right to object to the use of your child's name, picture or voice in these productions and may do so by completing the form below and returning it to the Parish Director of Faith Formation for St. Timothy Catholic Church.

(Parish Name)

If you have any questions, please contact the Faith formation office at:

813-961-1716/gina@sainttims.org . Please return this form by August 1, 2018.

(Phone/E-Mail)

(Date)

I/We, the undersigned, **do** or **do not** hereby consent that:

(Circle One)

St. Timothy Catholic Church may use the name, portrait, or other likeness of my child for

(Parish Name)

St. Timothy Catholic Church bulletin boards, Website, news releases, media and promotional activities.

(Parish Name)

This consent is renewed at the beginning of each Faith Formation Program Year.

**(complete one for each child)**

Student's Name

Date of Birth

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Father or Legal Guardian's Name (print)

\_\_\_\_\_  
Father or Legal Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother or Legal Guardian's Name (print)

\_\_\_\_\_  
Mother or Legal Guardian's Signature

\_\_\_\_\_  
Date



**Faith Formation  
Pick-up Authorization & Allergy Form**

<b>Office Use Only</b>	
Class: _____	_____
Class: _____	_____
Class: _____	_____

Child #1 Name: \_\_\_\_\_

Child #2 Name: \_\_\_\_\_

Child #3 Name: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Cell: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Cell: \_\_\_\_\_

Authorized to Pick-Up (other than parents)	Phone Number #1	Phone Number #2

**Allergy Information**

<b>Child 1:</b>	
<b>Child 2:</b>	
<b>Child 3:</b>	

I authorize my children to be photographed for the bulletin, First Communion and church website (no names attached). \_\_\_\_\_  
(Parent/Guardian Signature)