

**IMMACULATE CONCEPTION FAITH FORMATION  
2018- 2019 Registration Form**

**Family Information: Please Print Clearly**

FAMILY NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Father's Name \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Name \_\_\_\_\_ Religion \_\_\_\_\_ Occupation \_\_\_\_\_

Mother's Maiden Name \_\_\_\_\_

With whom does the child/ren reside \_\_\_\_\_

Contact Info: Father Phone # \_\_\_\_\_ Mother Phone # \_\_\_\_\_

House Phone # \_\_\_\_\_

Parents: Have attended **Protecting Gods Children** Workshop

Mother: YES NO

Father: YES NO

Parents: Have completed a **background check** at Immaculate Conception.

Mother: YES NO

Father: YES NO

**Individual Child Information:** We will need a copy of each child's Baptismal Certificate if not already on file.

\_\_\_\_\_ Grade K-8, Monday's 5:30-7:00pm

\_\_\_\_\_ Disciples Den, Sunday's 10-11:00am

\_\_\_\_\_ Other

First Name	Last Name	Sex	Birth Date	Grade	School	Baptism Date/ Church	Communion Date/Church	Special Needs

***Parent Discipleship: We need help in the following areas; catechists, adult & teen helpers, prayer tutors, hall monitors, dinner coordinators, snack coordinator, & office help. Please consider signing up in an area of need.***

\_\_\_\_\_ ***Yes, I can help! Name*** \_\_\_\_\_

**Office Use Only:**

Amount Owed \_\_\_\_\_ Paid \_\_\_\_\_ Ck \_\_\_\_\_ Cash \_\_\_\_\_ Receipt \_\_\_\_\_ TA \_\_\_\_\_

Baptismal Cert verified \_\_\_\_\_ Class List \_\_\_\_\_ QB \_\_\_\_\_ Breeze \_\_\_\_\_ Email \_\_\_\_\_

Mailing list \_\_\_\_\_ Notes \_\_\_\_\_

*June 1, 2018 tk*