

Quad-Parish Faith Formation Registration 2011 - 2012

936 9th Street Green Bay, WI 54304 920-497-7042

Serving Annunciation, St. Joseph, St. Jude and St. Patrick Parishes

Date of Registration: _____ Parish Registered At: _____ Family Last Name: _____

Children live with: _____ Both Parents _____ Mother _____ Father _____ Other (_____)

Mailings sent to: _____ Both Parents _____ Mother _____ Father _____ Other (_____)

Family Mailing Address: _____ City _____ Zip Code _____

Email Address: _____ Check to have information sent electronically: _____

Home Phone: _____

Father's Name: _____

Address: _____

Home Phone: _____

Occupation: _____

Work Phone: _____ O.K. to call? _____

Cell Phone: _____

Marital Status: _____

Religion: _____



Mother's Name: _____

Address: _____

Home Phone: _____

Occupation: _____

Work Phone: _____ O.K. to call? _____

Cell Phone: _____

Marital Status: _____

Religion: _____

Please describe any special needs your child(ren) may have: _____

Name (First & Last)	M/F	D.O.B.	School Attending	Grade in Fall	Baptismal Info: Church (city,state)	Date	Check if received: Reconciliation	Check if received: 1st Eucharist

*** Please fill out reverse side ***





Quad-Parish Faith Formation Tuition Agreement 2011-2012

Base tuition is **\$50 per child** with a **family base tuition cap of \$150.**

An additional materials preparation fee is added for students who are preparing for the sacrament of: **1st Reconciliation-\$25.00, 1st Eucharist-\$25.00 and Confirmation-\$50.00**

Base Tuition: \$50.00 x _____ (*# of students*) = **Total Base Tuition**.....

Additional Required Fees

1st Reconciliation Fee: \$25.00 x _____ (*# of students*).....

+

1st Eucharist Fee: \$25.00 x _____ (*# of students*).....

+

Confirmation Fee: \$50.00 x _____ (*# of students*).....

+

Total Tuition Due (*total all boxes*)

Payment Plans (*make checks payable to Faith Formation*)

_____ Paying in full with Registration

_____ Two Payments of \$_____ (1st payment w/registration, 2nd by Jan. 15, 2012)

_____ Three Payments of \$_____ (1st w/registration, 2nd by Nov. 15, 2011, 3rd by Mar. 15, 2012)

_____ Monthly Payments (due by last day of the month)

_____ Requesting Financial Assistance in the amount of _____. To qualify for assistance, you must:

- Be a **registered** member of one of the Quad-Parishes
- I am requesting financial assistance because: _____

SCRIP Commitment: \$15.00 **PROFIT** per family per year

_____ Yes, I plan on purchasing SCRIP through the RE Program (*do not carry over \$15.00*)

_____ No, I do not plan on purchasing SCRIP through the RE Program (*add \$15.00 fee*) +

I accept the policies of the Quad-Parish Religious Education/Youth Ministry Programs and understand that I am responsible for the tuition and Sacramental Fees above.

Signature of parent/guardian

Date

Signature of Pastor

Date

Volunteer Opportunities

Throughout the year many volunteers are needed to make our program a success. If you are able to help with one or more of the following areas, check them off and we will contact you with further information:

_____ Teach a Class (Grade _____) _____ Classroom Aide _____ Classroom Sub (Grade_____)

_____ Children's Liturgy (Sunday a.m.) _____ Chaperone Events _____ Youth Ministry Events _____ Baking/Snacks

_____ Hall Monitor (*early shift _____, late shift _____*) _____ Meal Coordination _____ Food Preparation _____ Clean-up