

St. Edward on-the-Lake Catholic Church
Faith Formation Program for 2014-2015

Family Name _____

Address _____ City/Zip _____ Phone _____

Father's Name _____ Work # _____

E-Mail Address _____

Mother's Name _____ Work # _____

E-Mail Address _____

Denomination/Parish _____

Present School(s) _____

IN CASE OF EMERGENCY CONTACT:

Name/Relationship _____ Phone _____

Name/Relationship _____ Phone _____

Please list the NAMES and GRADES of each young person attending our Faith Formation Program.

Name _____ Grade _____ Date of Birth _____ Place of Birth _____

Sacraments Received (Check those that have been received):

Baptism First Confession First Holy Communion Confirmation

Church of Baptism _____ City/State _____ Approx. Date _____

Name _____ Grade _____ Date of Birth _____ Place of Birth _____

Sacraments Received (Check those that have been received):

Baptism First Confession First Holy Communion Confirmation

Church of Baptism _____ City/State _____ Approx. Date _____

Name _____ Grade _____ Date of Birth _____ Place of Birth _____

Sacraments Received (Check those that have been received):

Baptism First Confession First Holy Communion Confirmation

Church of Baptism _____ City/State _____ Approx. Date _____

I am willing to help in the following areas (i.e. substitute teach, office help, aide): _____

- \$35.00 per child _____
- \$70.00 for 2 or more children _____
- \$15 Confirmation Materials _____ (Confirmation candidates only)
- Cash Amount _____
- Check # and Amount _____
- Date _____