

# Registration for Faith Formation at St. Peter's and St. Paul's 2011-2012

**Household Information:**

**Family Name** \_\_\_\_\_  
**Address:** \_\_\_\_\_ City \_\_\_\_\_ MN, Zip Code \_\_\_\_\_  
**Phone number:** \_\_\_\_\_ email address \_\_\_\_\_  
**At which parish are you registered** \_\_\_\_\_  
**Emergency Contact:** \_\_\_\_\_  
**Adults in household:** (those beyond high school for whom this is their primary residence)  
 Name (last and first) \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Children/youth in the household (begin with oldest please):**

NAME	DOB	SCHOOL ATTENDING	GRADE 2011-12	PLEASE LIST DATES IF POSSIBLE			
				BAPTISM DATE	EUCARIST DATE	RECONCILIATION DATE	CONFIRMATION DATE

**All Children preschool through grade 2 will need to be escorted to the classroom and picked up there as well.**

**Sign below:**

\_\_\_\_\_ I have reviewed the Safe Environment Materials of the St. Cloud Diocese  
 \_\_\_\_\_ I grant permissions for my child/youths photo to be used in parish photo displays.  
 \_\_\_\_\_ I do not grant permission for my children/youths photo to be used in parish photo displays

Please provide us with some information to help us to best serve your family: ie, special needs of family members, food or environmental allergies, living circumstances we should be aware of, recent loss or struggles, etc.:

**FAMILY LABEL**

**God blesses us with many gifts. Our community needs every one of us to contribute to create a vital process of life-long faith formation. Please indicate the ways you will support faith formation this year. Training is provided. We ask for all families with children to volunteer for at least two.**

**Select a number for each person completing this form #1 \_\_\_\_\_ (name) #2 \_\_\_\_\_ (name) #3 \_\_\_\_\_ (name)**

- \_\_\_\_\_ Adult study groups, participate, lead or help to organize
- \_\_\_\_\_ Facilitator, help lead discussions. Age group preference, if any \_\_\_\_\_
- \_\_\_\_\_ Catechist, provide faith formation education to a group on Wednesday evenings at 6:30pm for 1 hour.  
Age(s) you prefer: \_\_\_\_\_
- \_\_\_\_\_ Mentor a Confirmation Candidate
- \_\_\_\_\_ Confirmation team leader (training and materials provided)
- \_\_\_\_\_ Assist in a classroom. If a grade is preferred, please list \_\_\_\_\_
- \_\_\_\_\_ Peer Minister (high school youth) assist adults in classrooms, discussions,.... Age(s) you prefer \_\_\_\_\_
- \_\_\_\_\_ Parent helper in classroom or hallway
- \_\_\_\_\_ Assist with music ministry
- \_\_\_\_\_ Set up assistance, help in setting up tables and chairs prior to gatherings
- \_\_\_\_\_ Clean up assistance, help in cleaning up and storage of tables and chairs following gatherings
- \_\_\_\_\_ Hospitality, assist in set up and serving of cookies, bars, and beverages
- \_\_\_\_\_ Provide store bought cookies or bars for gatherings
- \_\_\_\_\_ Assist with stuffing bulletin inserts
- \_\_\_\_\_ Lead or assist with arts and crafts projects
- \_\_\_\_\_ Assist with Liturgy of the Word with Children at Masses
- \_\_\_\_\_ Assist with Vacation Bible School
- \_\_\_\_\_ Assist with junior high gatherings and events
- \_\_\_\_\_ Assist with high school ministry gatherings, retreats, and events
- \_\_\_\_\_ Assist with service learning and volunteer projects

\_\_\_\_\_ Other, please explain your interest: \_\_\_\_\_

**HELP US FROM HOME OPPORTUNITIES:**

- \_\_\_\_\_ \*Office assistance, help with mailings, preparing papers, etc.
- \_\_\_\_\_ \*Birthday cards-help address and write a note for birthdays throughout the year
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- \_\_\_\_\_ \*Birthday cards-help address and write a note for birthdays throughout the year
- \_\_\_\_\_ \*Phone support, make calls as requested from home
  
- \_\_\_\_\_ Provide cookies for our "Cookie Distribution to Homebound", December
- \_\_\_\_\_ Assist with our "Cookie Distribution to Homebound", December

Phone number and email of volunteer: #1 \_\_\_\_\_ #2 \_\_\_\_\_ #3 \_\_\_\_\_

**FINANCIAL SUPPORT (all payments are deductible as a parish contribution):**

These costs are a minimum amount to cover some of the expenses that are incurred. If you are able to make a free will offering to defray costs it will be most appreciated.

\_\_\_\_\_ senior citizen household ..... by donation \_\_\_\_\_  
\_\_\_\_\_ base home suggested contribution .....( suggested donation).. \$50.00 = \_\_\_\_\_  
AND  
\_\_\_\_\_ children, youth .....(suggested donation) .....each @ \$10.00 = \_\_\_\_\_  
Any additional donation you make assists in serving those who may be unable to donate. \_\_\_\_\_  
Total contribution: \_\_\_\_\_

Contributions can be made multiple times during the year.

**\*PLEASE MAKE ALL CONTRIBUTIONS BY DECEMBER 1<sup>st</sup>** in order to have them on your current year contribution statement, otherwise the remainder will appear on the next calendar year.

\*If you have a child/youth in a Sacramental preparation program we will need a copy (not the original) of their Baptismal Certificate unless they were baptized in our parishes. Please attach a copy with this registration form.

**FOR STAFF USE ONLY:**

Date Paid \_\_\_\_\_ Amount Paid \_\_\_\_\_ Check Number \_\_\_\_\_ Donation Recorded \_\_\_\_\_ Envelope # \_\_\_\_\_

Bill Sent \_\_\_\_\_ Additional Amount Paid \_\_\_\_\_

Comments (scholarship request, etc): \_\_\_\_\_

**Family label**