

**ST. MICHAEL & ST. PETER - FAITH FORMATION REGISTRATION 2022-2023**

FAMILY LAST NAME: \_\_\_\_\_ Father's 1<sup>st</sup> name \_\_\_\_\_

Mother's 1<sup>st</sup> name \_\_\_\_\_ Mother's maiden name: \_\_\_\_\_

Primary Address: \_\_\_\_\_ City/Zipcode \_\_\_\_\_

Primary Phone ( ) \_\_\_\_\_ Cell ( ) \_\_\_\_\_

Cell ( ) \_\_\_\_\_

Primary Email: \_\_\_\_\_ 2<sup>ND</sup> Email: \_\_\_\_\_

Children are living with: Both parents \_\_\_\_\_ Mother \_\_\_\_\_ Father \_\_\_\_\_

**CHILDREN BEING REGISTERED**

**Class times**

Pre-K to grade 6 Sunday 10:30-11:30am OR Grades 1 to 6 Monday 6:30-7:30pm  
 Grades 7 and 8 Sunday 12:30 -2:30pm once a month including seasonal large group meetings  
 Chosen4 (grades 9-11 & Confirmation) meeting time determined by group; also large group meetings

First Name	Last Name (if different)	Sun AM	Mon PM	Grades 7 & 8	Chosen4... 9,10 & 11	Grade in Sept	School District
1. _____	_____						
2. _____	_____						
3. _____	_____						
4. _____	_____						

***New family or additional youth from registered family please complete back side***

**Person other than a custodial parent who is authorized to pick up your child:**

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Name: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

**FEES: Pre-K to grade 8:**    by May 313    June 1- July-31    August 1-31    September 1 and beyond

One child                      **FREE**                      \$35.00                      \$50.00                      \$ 65.00

Two children                      **FREE**                      \$50.00                      \$65.00                      \$ 80.00

Three or more children **FREE**                      \$75.00                      \$90.00                      \$105.00

**Chosen4... :**                      **FREE**                      \$80.00                      \$95.00                      \$110.00

This fee covers the whole Chosen4... program from grade 9 through Confirmation.

**\*\*\*No child will be denied faith formation due to an inability to pay - contact Mrs. Barker \*\*\***

**IMPORTANT:** List any information helpful for us to know: (medical, food allergies, family or custodial arrangements, strategies that are helpful in a classroom setting to help your child learn)

Total amount paid \_\_\_\_\_ CK # \_\_\_\_\_

Family is registered in what parish \_\_\_\_\_

**Read photo authorization on the reverse and return completed form to address listed**

Please complete for New Family or Additional Youth from a registered family  
Family Name: \_\_\_\_\_

Father's Religion: \_\_\_\_\_ Mother's Religion: \_\_\_\_\_

Parents please note: If you are not Catholic but are interested in learning more about the Catholic faith please indicate below:

I would like to know more about the Catholic faith: Name \_\_\_\_\_

**NOTE:** To register you must present a \*Baptismal certificate for new youth as well as record of \*First Eucharist and \*First Penance if already received.

*\*not needed if Sacraments received at St. Michael's\**

Youth's Full Name	Date of Birth	City/State where born	Baptism y/n what church	First Eucharist y/n what church	First Penance y/n what church
1. _____					
2. _____					
3. _____					

**Return:** completed form (both sides), required certificates (Baptismal, Eucharist and Penance) and check (payable to Church of St. Michael/St. Peter) to:

CHURCH OF ST. MICHAEL & ST. PETER  
Attn: Bonnie Barker  
4782 W. SENECA TPK  
SYRACUSE, NY 13215

Mrs. Bonnie Barker, Director of Faith Formation 315-469-6600 ext 103  
FFstmichaelstpeter@syrdio.org

### **Photo Authorization**

Photographs and/or videos of minors are taken periodically for use in parish publications and to celebrate your child's and his or her fellow classmates participation and accomplishments.

Please note that the diocese, its parishes, schools and ministries have limited control over the use of photographs or film taken by private individuals or the media that may be covering the event in which your child(ren) participate(s).

**If you *DO NOT* wish your child's image to be used please list the child's name(s):**

\_\_\_\_\_

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent

\_\_\_\_\_  
Printed name of parent