ST. MADELEINE SOPHIE PARISH - OFFICE OF FAITH FORMATION

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For office use only - date rec'd:#:#:	fee rec'd: check #	: on computer:
**For parents' use: I ha	ive enclosed a check or	have used the E-Giving
2013/2014 Faith Formation	Program Family Registra	ation - Gr. 1 through 11
Registration Fees, including for Hor	•	
If received by June 30, 2013: \$60 for If received after July 1, 2013: \$65 for		• •
*Reduced fees for catechists: \$45 for	• •	
•	SMS Church or go to www.s	, .
Faithful E-Giving/Donate with	PledgeConnect (select Faith	Formation Registration).
List each child, in grades 1-11, who	is haing registered for the S	MS Faith Formation Program
For first time registrations, BAPTISMAL (_
Student Name:	Rirthday:	Grade in 2013/14:
Parish and date of Baptism:		
Student Name:		
Parish and date of Baptism:		
Student Name:	Birthday:	Grade in 2013/14:
Parish and date of Baptism:		
Mother's Name:	Father's Name	:
Email:	Email:	
Address:		
Home phone:	Home phone: _	
Home phone: Work:		Work:
	Cell:	

Name: ______ Relationship to child: ______ Phone number(s) to reach contact: ______

Name: ______ Relationship to child: ______

Phone number(s) to reach contact:

PARISH REGISTRATION INFO

In order to participate in the Faith Form or St. Gabriel's Parish. At which church	are you a par	ishioner?		
(If you are not parishioners, please requ	est a Parish R	Registratio	n Card to submit with thi	s form.)
************	******	******	********	*****
	VOLUNTEE	R OPPOI	RTUNITIES	
I am/We are(Name)		int	erested in helping the Faith	Formation program as a:
Catechist* (Teacher) - *reduced	d fee for your o	child(ren)	enrolled in Faith Formation	Program
Substitute Catechist	Classroom	Aide	Gatekeeper	Office Aide
Classroom checker (clean-up af	ter classes)		Volunteer at receptions	
High School Retreat Team member			Chaperone/helper for service projects, activities	
Vacation Bible School helper			Children's Liturgy of the \	Word Catechist
Baker for gatherings		Other:		
**********	********	******	*******	*****
PARENT/GUARDI	AN CONSE	NT FORM	1 - PHOTO/VIDEO REL	<u>EASE</u>
<i>I grant permission</i> for my son(s)/daugh	nter(s) to be ph	notograph	ed during classes, programs	and activities sponsored by
the St. Madeleine Sophie Faith Formation O	ffice during th	e 2013-14	school year. I further agree	that these photos (still and
moving) may be used in a variety of context	s to spotlight t	the Faith F	ormation program, including	g the parish and diocesan
websites, parish bulletin boards and newsle	tter, news rele	eases for co	ommunity newspapers, the	Evangelist, etc.
<i>I do not grant permission</i> for my son(s)/daughter(s) t	to be phot	ographed while participating	g in the St. Madeleine
Sophie Faith Formation program during the	2013-14 schoo	ol year.		
Parent/Guardian Signature:			Date:	
************	******	*****	*********	******
PARENT RELEASE: There are times who	en the children	in the Fair	h Formation program walk	over to the Church, Parish
Hall or Parish Center for religious services o	r instruction w	ith their cl	asses and catechists. Please	e sign below to give
permission for your child(ren) to leave the o	lassroom with	his/her/th	eir class to participate in th	ese activities.
Parent/Guardian Signature:			Date:	

2013-14 Faith Formation Class Enrollment Form – *Grades 1 to 8 in Sept. 2013*Registration form with fee is required for student(s) to be enrolled, including <u>all</u> home classes. Important: Without catechists, some classes may not be offered. Please consider teaching a class!

INDICATE YOUR 1ST AND 2ND CHOICE NEXT TO CLASS TIMES BELOW - *GR. 2 MUST ATTEND CLASSES AT SMS

1. Student's name:	Faith Formation Grade: School:
Are there any food allergies, medical or educational is	ssues we need to know about this child? No
If Yes - specify:	
Grades 1 to 6, Saturday - 9:30 to 10:30 AM	Grades 1 to 5, Thursday - 3:30 to 4:30 PM
Grades 7 and 8, Tuesday - 7 PM to 8 PM	$_$ Grades 1 to 8, Thursday - 5 PM to 6 PM
*Home Class with catechist: Name of Catechist:	·
*Independent Home Study with parent; Chapter	Review component required
2. Student's name:	
If Yes - specify:	
Grades 1 to 6, Saturday - 9:30 to 10:30 AM	Grades 1 to 5, Thursday - 3:30 to 4:30 PM
Grades 7 and 8, Tuesday - 7 PM to 8 PM	Grades 1 to 8, Thursday - 5 PM to 6 PM
*Home Class with catechist: Name of Catechist:	:
*Independent Home Study with parent; Chapter	Review component required
3. Student's name:	Faith Formation Grade: School:
Are there any food allergies, medical or educational is	ssues we need to know about this child?No
If Yes - specify:	
Grades 1 to 6, Saturday - 9:30 to 10:30 AM	Grades 1 to 5, Thursday - 3:30 to 4:30 PM
Grades 7 and 8, Tuesday - 7 PM to 8 PM	Grades 1 to 8, Thursday - 5 PM to 6 PM
*Home Class with catechist: Name of Catechist:	
*Independent Home Study with parent; Chapter	Review component required
4. Student's name : Are there any food allergies, medical or educational is	Faith Formation Grade: School: ssues we need to know about this child? No
If Yes - specify:	
Grades 1 to 6, Saturday - 9:30 to 10:30 AM	Grades 1 to 5, Thursday - 3:30 to 4:30 PM
Grades 7 and 8, Tuesday - 7 PM to 8 PM	Grades 1 to 8, Thursday - 5 PM to 6 PM
*Home Class with catechist: Name of Catechist:	:
*Independent Home Study with parent; Chapter	· Review component required

<u>2013-14 Faith Formation Class Enrollment Form – Grades 9, 10 and 11 in Sept. 2013</u> **Registration Form and Fee is required to enroll student(s), including for home classes. (Students in Gr. 11 will also complete specific forms for Confirmation preparation classes.)

1) Student's name:		Faith Formation Grade:	
High School:	School Grade 2013/14:		
Are there any food allergies	s, medical or educational issues	we need to know about this child?	No
If Yes - specify:			
Pleas	e indicate the Faith Formation	class you prefer below:	
Grades 9 and 10: Tuesd	ays - 7 to 8 PM at SMS Parish Hal	l with a catechist (*catechists needed.)	
Closed Home Class: Nar	ne of Catechist:		
Independent Home Stud	dy with parent; Chapter Review c	omponent is required.	
Parent is interested in t	eaching a *Home Class - Name: _		
*I already have	students; I am willing to take	more students. (Max # in class?)
11 th Grade Student - Cor	nfirmation Candidate		
2) Student's name:		Faith Formation Grade:	
High School:		School Grade 2013/14:	
Are there any food allergies	s, medical or educational issues	we need to know about this child?	No
If Yes - specify:			
Pleas	e indicate the Faith Formation	class you prefer below:	
Grades 9 and 10: Tuesd	lays - 7 to 8 PM at SMS Parish Hal	l with a catechist (*catechists needed.)	
Closed Home Class: Nar	ne of Catechist:		
Independent Home Stud	dy with parent; Chapter Review c	omponent is required.	
Parent is interested in t	eaching a *Home Class - Name:		
		more students. (Max # in class?	
11 th Grade Student - Coi	ıfirmation Candidate		