

**Blessed Sacrament Parish Community**  
Sunday Faith Formation (FFS) Registration Form  
**2017 - 2018**

<i>For office use only:</i> Date Paid _____ Check # _____ Cash _____ Amount Pd. _____
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Student's Grade \_\_\_\_\_ Birthdate \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Student's Name \_\_\_\_\_  
(Last) (First) (MI)

Address \_\_\_\_\_  
(Street) (City, State) (Zip)

Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_ (Parent's)

Cell Phone (Mom) \_\_\_\_\_ (Dad) \_\_\_\_\_ \*indicate ph. for onecall

**Sacraments Celebrated:** *(Please indicate yes or no, church, AND city, state for each sacrament)*

Baptism \_\_\_\_\_  
(yes/no) (Church) (City, State)

Reconciliation \_\_\_\_\_

Eucharist \_\_\_\_\_

Confirmation \_\_\_\_\_

**School System:** \_\_\_\_\_  
(System) (Building)

**Student lives with:** *(parents/ grandparents or Guardians, please indicate)*

Father \_\_\_\_\_ Religion \_\_\_\_\_

Mother \_\_\_\_\_ Religion \_\_\_\_\_

**Other Parent:** *(If child does not live with both biological/adoptive parents)*

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City, State) (Zip)

**Are you registered members of Blessed Sacrament?** \_\_\_\_\_

**If not, where?** \_\_\_\_\_

**Permission to share address with JFK** \_\_\_\_\_ yes \_\_\_\_\_ no

The fee for FFS PreK through 8<sup>th</sup> grades is \$45 per student with a family maximum of \$110. The fee is due in the parish office by October 9th. If there is a problem or you are unable to pay the fee, please contact the office. **NO CHILD WILL BE KEPT FROM BLESSED SACRAMENT'S FAITH FORMATION PROGRAM BECAUSE OF AN INABILITY TO PAY.**

**(Medical form on back) OVER**