

Saint Michael

25 MAPLE AVENUE, BEACON FALLS, CT 06403
PHONE 203-729-2504 FAX 203-723-0710

FAITH FORMATION REGISTRATION (GRADES 1-7) 2024-2025

Registration Fee: Parishioner: \$35.00 Non-Parishioner: \$55.00
Maximum per Parishioner family: \$75.00 Maximum per Non Parishioner Family: \$160.00
Maximum Fees Do Not Include Confirmation Registration.

Deadline for registration is September 15, 2024.

(Students in grades 8 and 9, please use Confirmation Registration)

Child's Name: _____ Grade: _____

Parent/Guardian Name: _____

Address: _____ Email: _____

Primary Phone #: _____ Secondary Phone #: _____

We are currently registered parishioners of St. Michael Church, Beacon Falls, CT: ___ Yes ___ No
If not currently a registered parishioner, which parish are you a member of?: _____

Has your child been baptized: ___ Yes ___ No

Place of Baptism:

St. Michael Church, Beacon Falls Other: _____

Parents of 3rd Grade Students: PLEASE NOTE that if your child was NOT baptized at St. Michael Church, Beacon Falls, CT, a copy of his/her Baptism Certificate must be attached to this form in order to register. All students registering for 3rd Grade Faith Formation MUST have completed the 1st and 2nd Grade curriculum.

Please provide an alternate contact in case of an emergency and we are unable to contact you:

Name: _____ Phone #: _____

I am aware that my child(ren) will view and participate in virtual online learning Faith Formation classes facilitated by Saint Michael Church, Beacon Falls CT for the 2024/25 year if needed.

Parent's/Guardian's Signature: _____ Date: _____

.....
FOR OFFICE USE ONLY:

Date Received: _____

Total Payment: _____

Cash: _____ Check# _____