

# *Saint Michael*

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

## **FAITH FORMATION REGISTRATION (GRADES 1-7) 2025-26**

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 14, 2025.**

***(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 3<sup>rd</sup> 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 3<sup>rd</sup> grade Faith Formation MUST have completed the 1<sup>st</sup> and 2<sup>nd</sup> 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 CCD classes facilitated by Saint Michael's Church, Beacon Falls CT for the 2025/26 year if needed.**

Parent's/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_

Total Payment: \_\_\_\_\_

Cash: \_\_\_\_\_ Check# \_\_\_\_\_