



**PEACE OF CHRIST PARISH
FAMILY FAITH FORMATION
REGISTRATION FORM**

CHOOSE ONE:
HOME STUDY _____
OR
SUMMER SESSION _____

FAMILY NAME _____ TELEPHONE _____

ADDRESS _____ ZIP _____ E-MAIL _____

MOTHER'S NAME: _____ Maiden Name _____ Work Phone _____ Religion _____

FATHER'S NAME _____ Work Phone _____ Religion _____

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CHILD(REN)'S NAME	Birthdate	Grade in School	SACRAMENTS (date received and church)			
		September 2007	Baptism	Eucharist	Penance	Confirmation

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DOES YOUR CHILD HAVE ANY SPECIAL NEEDS? If so, please explain _____

REGISTERED MEMBER of PEACE OF CHRIST PARISH _____

**FEES: \$50 for 1 child,
\$75 for 2 children,
\$90 for 3 or more children**

Scholarship money is available.

Office use:
Amt. Paid _____
Check # _____
Date _____
By _____