



St. Jerome and St. James
2017-2018 PFF (Parish Faith Formation) Registration Form



Father's full name _____ Email _____

Best number to reach me _____ OR _____

Mother's full (Maiden) name _____ Email _____

Best number to reach me _____ OR _____

Address _____ City/Zip _____

Our family is registered at: __ St Jerome __ St James __ Other _____

EMERGENCY INFORMATION: In the event you are unable to reach us, you may contact:

NAME: _____

RELATIONSHIP _____

PHONE NUMBER _____ OR _____

<p>Child's Name _____ Grade _____ School _____ Birthday _____</p> <p>SPECIAL NEEDS? Please let us know of any allergies, medical, emotional, or learning concerns: _____</p> <p>IS YOUR CHILD TAKING ANY MEDICATION? _____</p>

<p>Child's Name _____ Grade _____ School _____ Birthday _____</p> <p>SPECIAL NEEDS? Please let us know of any allergies, medical, emotional, or learning concerns: _____</p> <p>IS YOUR CHILD TAKING ANY MEDICATION? _____</p>

<p>Child's Name _____ Grade _____ School _____ Birthday _____</p> <p>SPECIAL NEEDS? Please let us know of any allergies, medical, emotional, or learning concerns: _____</p> <p>IS YOUR CHILD TAKING ANY MEDICATION? _____</p>

<p>Child's Name _____ Grade _____ School _____ Birthday _____</p> <p>SPECIAL NEEDS? Please let us know of any allergies, medical, emotional, or learning concerns: _____</p> <p>IS YOUR CHILD TAKING ANY MEDICATION? _____</p>

Which session(s) to register your child(ren)?

GRADES K-5 _____Wednesday 4:15-5:30 OR _____Wednesday 6:15-7:30

GRADES 6-8 _____Wednesday 6:15-7:30

___ *I am interested in volunteering as a PFF Catechist or Session Secretary*

Background checks and Protecting God's Children must be taken to volunteer

___ **I have completed Protecting God's Children**

___ **I have a background check on file with the Springfield Diocese**

Neither? Easy remedy: ___ I am interested in attending a Protecting God's Children session.
(If needed, we would be happy to schedule a session at St. Jerome.)

REGISTRATION FEE:

Number of Children _____ X \$40.00 = Total Fees _____

*(There is no fee for children of Catechists and Session Secretaries.
With a grateful "Thank you!" for your ministry!)*

*If you are unable to pay these fees, please contact the parish office.
We do not want the fees to stand in the way of our children's religious education.*

Please return registration form and payment to the parish office.

___ I give permission to St Jerome Church to responsibly include my child(ren) in a photo for the parish bulletin, website, facebook, and/or Catholic Times (diocesan newspaper).

Parent Signature _____ Date _____

For office use:

Check # _____ Amount paid _____ Date _____