



FAITH FORMATION
Lifelong and Ongoing

FAITH FORMATION

Auburn and Cayuga County Catholic Parishes
299 Clark St, Auburn, NY 13021
(315) 252-7593

Faith Formation Registration for 2023-2024

Child's Info

First Name	Middle Name	Last Name	Parish
Home Address		City, State	Zip
Birthday and Year	Grade entering in Fall 2022	School Attending	

Sacramental Info

Baptism Date	Parish where Baptism took place
1 st Penance Date	Parish where 1 st Penance took place
1 st Communion Date	Parish where 1 st Communion was received

Please Choose a Program:

Full description of each program and schedules are available for review to help make your decision.

___ Allelu (Pre-k)

___ Kindergarten Faith Club (*Kindergarten*)

___ Family of Faith (*1st through 5th Grade*)

___ Catholic Connections (*6th-7th Grade*)

Registration fee:

\$30 for 1st Child, \$20 for each additional child up to \$100 maximum per family

*****If your only child is in Pre-K OR Kindergarten the fee is \$20**

Checks should be written out to "Faith Formation".

Mail registration forms to: Faith Formation, 299 Clark St, Auburn, NY 13021

**If you cannot afford the registration fee, please call the Faith Formation Office at 315-252-7593*

**Finances will not keep a child(ren) from participating in Faith Formation*

Child's Health and Safety Info

Physician's Name	Physician's Phone Number
Does your child have any allergies or special needs? (Feel free to attach a note if you like)	
<i>All medications, epipens, etc must remain in the Religious Education Office for safekeeping during the program.</i> <i>*NKDA = No Known Drug Allergies</i>	
Emergency Contact (If the parents aren't available)	Emergency Contact's Phone Number

Who else has your permission to pick up your child?

Do you have any objections to your child's photo being taken and/or displayed in church for special events? Yes_____ No_____

Family Info: Email and Phone are required. Communication is of utmost importance!

Mother's Name	Mother's best phone number (cell preferred)	Mother's second best phone number (work/home)
Mother's email address		
Father's Name	Father's best phone number (cell preferred)	Father's second best phone number (work/home)
Father's email address		

*Please put at least one email down, as email one of our primary forms of communication.

☐ Married

☐ Divorced

☐ Separated

Who is the primary contact (First person to call, email, etc.)? _____

Anything else we need to know?