

2024-2025

SACRAMENTAL PREPARTION REGISTRATION

1ST Reconciliation—1st Communion--Confirmation

This form must be completed on BOTH sides.

Student's Name: _____ Grade Level: _____

Date of Birth: _____ City/State of Birth: _____

Select Desired Sacrament: _____ None this year.
_____ 1st Communion
_____ Confirmation (Must be at least a freshman in high school.)

Is your family registered at St. Ann _____ YES _____ NO. Child must be registered member of this Parish the Sacrament. If **NOT** a Parishioner, please make an appointment with Father.

Student's Baptism Date: _____ Parish where baptized: _____

City/State: _____

If preparing for Confirmation, please continue:

Date of 1st Reconciliation: _____ Parish: _____

City/State: _____

Date of 1st Communion: _____ Parish: _____

City/State: _____

Please make sure all blanks are filled out.

St. Ann Faith Formation

2024-2025 Registration Form

Grades K-12

Father's Information

Name: _____

Address: _____

City/State/Zip: _____

Cell Phone: _____

Email: _____

Mother's Information

Name: _____

Address: _____

City/Sate/Zip: _____

Cell Phone: _____

Email: _____

EMERGENCY CONTACT IS CASE PARENT CANNOT BE REACHED:

Name: _____ Phone: _____

Student's Information

First/Last name	DOB	Grade	Allergies/Medical conditions

Fees: \$50 one child \$75 per family

Please return this form and money by either:

Placing it in the collection basket in an envelope marked Faith Formation.

Dropping it off at the parish office in an envelope marked Faith Formation.

My child(ren) have permission to be photographed for The Criterion, parish website/bulletin).

_____ YES _____ NO

Parent Signature: _____ Date: _____