

**St. Mary's Parish  
FAITH FORMATION REGISTRATION FORM 2017-2018**

St. Mary's Faith Formation Office • 1303 West Broadway • Winona, MN 55987 • (507) 452-5656

FAMILY LAST NAME \_\_\_\_\_ PARENT(S) NAME(S) \_\_\_\_\_ / \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE: Mother's \_\_\_\_\_ Father's \_\_\_\_\_  
 Cell Phone \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Emergency number and/or person to contact, if parent(s) cannot be reached: \_\_\_\_\_  
 CHILD(REN) LIVES WITH: Both Parents \_\_\_\_\_ Father \_\_\_\_\_ Mother \_\_\_\_\_ Other \_\_\_\_\_  
 If other, please give address, phone & relationship: \_\_\_\_\_  
 PARISH IN WHICH FAMILY IS REGISTERED? St. Mary's \_\_\_\_\_ None \_\_\_\_\_ Other (name) \_\_\_\_\_

<b>STUDENT INFORMATION</b>	<b>Child</b>	<b>Child</b>	<b>Child</b>	<b>Child</b>	<b>Child</b>
First Name					
Last Name, if different					
Sex (M or F)					
Birth Date					
Grade					
Age					
School					
Special Needs: (A.D.D., Allergies Special challenges/situations, etc.)					
<b>SACRAMENTS RECEIVED (Mark with an x)</b>					
Baptism					
First Reconciliation					
First Eucharist					
Confirmation					
<b>FAITH FORMATION OPTIONS</b>					
<b>(Mark with an x whether your child/children plan to attend Wednesday FF or Sunday School)</b>					
<b>Wednesday Faith Formation</b>					
<b>Sunday School (Ages 3-5)</b>					