

2020-2021 Faith Formation Registration Form 1st - 8th Grade (ONLY)

Saint Agnes Parish • 11400 St. Agnes Lane • North Huntingdon, PA 15642 • 724-864-5393

First Name _____ Middle _____ Last _____
(formal given name)

Address _____ City _____ Zip _____

Birthdate _____ Primary Phone # _____ Grade _____ (Entering in Fall 2020)

E-Mail

(Flocknote is our primary means of communication, please list e-mail address used most often.)

Are you a registered member of St. Agnes Parish? Yes No - If no, registered at _____

FAITH FORMATION CHOICE FOR 2020/2021

PLEASE NOTE: Due to the uncertainty of COVID-19, as this school year opens, we are preparing for a potential seamless transition. We will begin the Fall semester by offering all three options listed, but if things change then each family unit will continue work at home with their child/children and turn in their completed chapter work each month to the designated file bins by the Convent door.

Please indicate your preference: **(Only check one option)**

_____ **Generations Of Faith (GOF)** Gr. 1-7 Meet as a family 1 Fri. a month with other families for dinner and teachings on chapter.

_____ **Small Home Study Groups (SHSG)** Gr. 1-7 Meet as small family GROUPS in the home to complete the chapter work.

Please indicate the spokesperson for your group _____

_____ **Home School (HS)** Gr. 1-7)

Gr. 8 ONLY...They will be placed into small study groups with mentors for Confirmation preparation.

8th graders are still encouraged to attend other options with their family,.

SACRAMENTAL INFORMATION

* **ATTENTION PARENTS of 2nd GRADE CHILDREN!** (Entering 2nd Grade in the Fall) - *If your child was **not** baptized at St. Agnes Church,* please attach a copy of your child's **Baptismal Certificate**.

* **ATTENTION PARENTS of 8th GRADE CHILDREN!** (Entering 8th Grade in the Fall) - *If your child did **not** receive their First Holy Communion at St. Agnes Church,* please attach a copy of your child's **Baptismal Certificate**.

Mother's Name _____ Maiden Name _____

Mother's Cell Phone # _____ Accepts texts: Yes _____ No _____

Father's Name _____

Father's Cell Phone # _____ Accepts texts: Yes _____ No _____

Allergies, health issues, or other issues we need to be aware of (Ex. custody, special schedules, etc.):

In case of emergency, call (other than parents):

Name _____ Phone # _____ Relationship _____

Permission to publish a photograph of my child on Diocesan websites or local newspapers. Please initial.

YES _____ NO _____

FEE: \$35.00 per child - \$90.00 per family of 3 or more 1st- 8th grade students ONLY
Due at time of registration. Make checks payable to: St. Agnes Church.

REGISTRATION DUE BY: AUGUST 1, 2020

Please note **ALL CATHOLIC SCHOOL students must register**— fee is waived

For Religious Formation Office use:

Date Rec'd _____ Paid: Yes No Amount \$ _____ Check # _____ Cash _____