

**ALIVE IN CHRIST**  
**Mother of Sorrows Church**  
**Faith Formation**  
**2018-2019**

*The information you provide to us on this form will be used exclusively  
within our Parish Office and Mother of Sorrows Faith Formation.  
Thank you.*

**Family Name:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

\_\_\_\_\_

**Preferred Phone Number:** \_\_\_\_\_

(Please identify whose phone number this is and whether home or cell phone)

**Preferred Email:** \_\_\_\_\_

(Please provide an email that you check regularly as this will be the form of primary communication with families and identify whose email address this is)

**Father's Name (First, Last):** \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Preferred Phone Number (if different from above): \_\_\_\_\_

Preferred Email (if different from above): \_\_\_\_\_

**Mother's Name (First, Last):** \_\_\_\_\_

Address (if different from above): \_\_\_\_\_

Preferred Phone Number (if different from above): \_\_\_\_\_

Preferred Email (if different from above): \_\_\_\_\_

Faith Formation preference:

Sunday Morning: \_\_\_\_\_ Catechesis of the Good Shepherd: \_\_\_\_\_ In the Home: \_\_\_\_\_

Are you interested in assisting with:

Hospitality: \_\_\_\_\_ Welcome: \_\_\_\_\_ In the classroom: \_\_\_\_\_

*Registration fee is \$75.00 per child. Fee payable by cash or check payable to Mother of Sorrows Church.  
Registration form/fee can be returned to the Parish Office or the Welcome Center in envelope marked "Faith Formation".  
Thank you.*

**OVER**

Office Use:

Date Received: \_\_\_\_\_ Check #: \_\_\_\_\_ or Cash \_\_\_\_\_ Amount: \_\_\_\_\_

**Child's Name:** \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Current Age: \_\_\_\_\_ Grade Level: \_\_\_\_\_

Child's Gender (circle one): M or F Name of School Attending: \_\_\_\_\_

**Sacrament Information (Please indicate sacraments received, circle "Yes" or "No")**

+Baptism: Yes or No

Roman Catholic or Other Christian Denomination: \_\_\_\_\_  
(Please indicate denomination)

+First Reconciliation: Yes or No +First Communion: Yes or No

+Confirmation: Yes or No

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Parent's Signature: \_\_\_\_\_