



Mail:
403 St. Croix St.
Hudson, WI 54016

Phone:
715.386.9209

Office Use Only	Date Received	ID Number
	Check/Cash Rept #:	Registration Number
Office Use Only		

REGISTRATION FORM: 2011 – 2012

NOTE: ANY REGISTRATION FOR A NEW CHILD EVEN ONE ADDED TO A PREVIOUSLY ENROLLED FAMILY MUST HAVE A BAPTISMAL CERTIFICATE ON FILE.

FAMILY INFORMATION (Please Print Clearly)

Family Last Name		Home Phone		Unlisted - check here: <input type="checkbox"/>	
Street Address		City	State	Zip	
Father's First Name		Last Name (If Different)		Alt. Phone: Work <input type="checkbox"/> Cell <input type="checkbox"/> Pager <input type="checkbox"/> Ext:	
Father's Religion		Father's Email <input type="checkbox"/> Personal <input type="checkbox"/> Family			
Mother's First Name		Last Name (If Different)		Alt. Phone: Work <input type="checkbox"/> Cell <input type="checkbox"/> Pager <input type="checkbox"/> Ext:	
Mother's Religion		Mother's Email <input type="checkbox"/> Personal <input type="checkbox"/> Family			
Emergency Contact Person		Relationship to Family		Phone: Work <input type="checkbox"/> Cell <input type="checkbox"/> Pager <input type="checkbox"/> Ext:	
Custodial Agreements	Please check custodial parent as applicable	<input type="checkbox"/> Joint <input type="checkbox"/> Mother <input type="checkbox"/> Father		Note: Copies of any court ordered restrictions of parental rights must be on file with the Faith Formation Office or we will not be able to enforce them.	
Additional Notification Address (shared or non-custodial parent)		First Name		Last Name	
Street Address		City	State	Zip	
Signature of Parent or Guardian				Date	

(Please include new address if moving by September 1, 2011 and also the date of move.)

PROGRAM AND MATERIAL FEES

Basic Fees	Number of Children ____	X \$105.00 =	
First Sacrament Fee (additional materials/program fee)	Number of Children ____	X \$60.00 =	
Middle School Retreat Fee	Number of Children ____	X \$10.00 =	
Junior Confirmation Fee (additional material program fee)	Number of Children ____	X \$30.00 =	
A \$25.00 deposit is required at the time of registration. The deposit will be deducted from your fee total. The deposit fee is nonrefundable			Fee Total =
			Less Deposit -
			Balance =

NOTE:

- **K – 5 & High School Sessions begin Wednesday, September 21, 2011.**
- **Middle School Sessions begin Wednesday, September 28, 2011.**

MAKE ALL CHECKS PAYABLE TO: ST. PATRICK FAITH FORMATION

NO CHILD WILL BE DENIED FORMATION IN THE FAITH DUE TO INABILITY TO PAY.

Please contact St. Patrick Faith Formation for payment and scholarship options.

revised: 08-10- 2011

Continued on Reverse Side

Office Use Only	Office Use Only	
	Totals	Amount
	Previous Year Balance	\$
	Total Fees	\$
	Admin. Adjustment	\$
	Amount Paid	\$
Balance Due	\$	

CHILD INFORMATION (fill out one block for each child)		Registration Information (check boxes below as necessary)		
Child Name: _____		Grade: (in Fall)	Elementary (Gr. K - 5)	All K-5 Sessions meet Wednesdays at St. Patrick School Please Check 1st Choice for Time:
Birth Date: _____	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/>	<input type="checkbox"/> 5:00 p.m. <input type="checkbox"/> 6:30 p.m.
Sacraments Received (Include Dates & Copies of Certificates):		Middle School (Gr. 6 - 8)	<input type="checkbox"/>	Middle School Meeting Times: Wednesday, 6:00 to 7:30pm Small Groups meet in homes Large Groups meet at St. Patrick Church
_____ Baptism _____ 1st Reconciliation				
_____ 1st Eucharist _____ Confirmation		High School (Gr. 9-12)	<input type="checkbox"/>	Senior High Meeting Times: Wednesday, 7:00 to 8:30pm Small Groups meet in homes Large Groups meet at St. Patrick Church
Special considerations (i.e. carpool - list families, custody issues, etc.):				
Special Needs / Allergies:		Family Faith Formation	<input type="checkbox"/>	Meeting Times: Family meets together weekly on their own schedule Families meet once a month for gathered activities.

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6, 7, 8, & 9th Grade Families Only!
To assist in home group assignments, please check the most accurate description of where you live (see map enclosed for more information)
<input type="checkbox"/> 1. Badlands <input type="checkbox"/> 2. Bottom of the Hill <input type="checkbox"/> 3. By High and Middle Schools <input type="checkbox"/> 4. North East Territories <input type="checkbox"/> 5. North Hudson <input type="checkbox"/> 6. South of I-94 <input type="checkbox"/> 7. Top of the Hill

Child Picture/Name Release
Throughout the formation year there are times when your child(ren)'s photograph or image may be taken or his/her name is used in print. Some of these times may include, but are not limited to parish or diocesan bulletins, newsletters, websites, social media, and newspapers. Both print and electronic media have a very large audience and your child(ren)'s photographic image may have an extremely wide distribution.
Refusal: <input type="checkbox"/> I do not wish to have my child(ren)'s picture/name released for any media purpose.
Acceptance: <input type="checkbox"/> I give St. Patrick Parish permission to use my child's photo/name for the above purposes.

Note: A **Baptismal Certificate** is required for any new child registering for the first time and is required to be on file prior to the celebration of a sacrament.