



WHOLE COMMUNITY CATECHESIS REGISTRATION FORM

ALL HOUSEHOLDS

OFFICE USE ONLY:
GOF SESSION

SACRAMENTAL
PROGRAM

PLEASE FILL OUT ALL PORTIONS OF FORM THAT
PERTAIN TO YOU AND YOUR FAMILY
AND RETURN - EVEN IF NOT

REGISTERING FOR GENERATIONS OF FAITH, SACRAMENTS AND/OR YOUTH MINISTRY

(PLEASE PRINT CLEARLY)

Last Name _____ 1st. Name _____ Spouse _____

Maiden Name _____ E-mail(s): _____

Reminders will be sent out via e-mail.

Address: _____ City: _____ NY Zip: _____

HOME Ph. _____ 1. CELL Ph: _____ 2. CELL Ph: _____

What is the best way to reach you? Email _____ Phone # _____

(Please list all your children even if they are below or above school age or attend Catholic School)

Name (please include last name if different from parents)	M/F	Date & Place of Birth	Age	Grade as of 9/08	Date & Place of Baptism	School

GENERATIONS OF FAITH REGISTRATION

GENERATIONS OF FAITH IS THE FORMAL FAITH FORMATION PROGRAM FOR ALL MEMBERS OF CORPUS CHRISTI AND IS A PRE-REQUISITE FOR THE SACRAMENTS.

Time Schedule for Preparation Sessions

***Please know that your participation in Generations of Faith is very important to us. Please, indicate the day that is best for your current schedule. If you cannot make your chosen day and time, please, call our office. We will be happy to work with you to arrange a schedule to make it possible for you to attend. *** **PLEASE NOTE TIME CHANGE FOR SUNDAY SESSIONS**

_____ Tuesday 9:45 am – Noon

_____ Tuesday 5:45-8:15 pm

_____ Wednesday 5:45-8:15 pm

_____ Friday 5:45-8:15 pm

_____ Sunday 11:30 – 2:00 pm

_____ Sunday 4:30 – 7:00 pm

2. Does anyone in your household have **food allergies** or **special needs** which we should be aware of?

Please describe: _____

REGISTRATION FEES FOR GENERATIONS OF FAITH: Early registration ensures your choice of day and time – PLEASE REGISTER BY JULY 1ST, 2008, IF POSSIBLE.

Unless other arrangements are made with the office, please, include all fees with the registration form.

\$25 Per Individual Registration \$35 Per Couple Registration \$60 Per Family Registration _____

SACRAMENTAL REGISTRATION

Please indicate family members who need to register for SACRAMENTAL PREPARATION:

Baptism: Name _____

RCIA: (Rite of Christian Initiation for Adults or older children not yet baptized) Name(s) _____

Grade 2: 1st Reconciliation (Fall 2008) & **1st Eucharist** (Spring 2009)

Name: _____ Date of Baptism: _____ Parish/City of Baptism _____

All other grades: 1st. Reconciliation (Fall 2008) and/or **1st. Eucharist** (Spring 2009)

Name: _____ Date of Baptism: _____ Parish/City of Baptism _____

Confirmation:

Name: _____ Date of Baptism _____ Parish/City of Baptism _____

(Offered Fall 2008 – preparation begins in Grade 10- Confirmation in Grade 11 or older)

PLEASE PROVIDE A COPY OF CHILDS BAPTISMAL CERTIFICATE – IF NOT BAPTIZED AT CORPUS CHRISTI

ADDITIONAL FEES FOR EACH SACRAMENTAL TRACK:

\$45 per candidate for combination of 1st. Reconciliation **AND** 1st. Eucharist Preparation Programs.

\$25 per candidate for those needing **ONLY** 1st. Reconciliation Preparation **OR ONLY** 1st. Eucharist Preparation Program.

\$35 per candidate for Confirmation Preparation.

YOUTH MINISTRY REGISTRATION

Grade 6 to Grade 12

NAME(S) _____

I would like to register for: Level 7 Retreat _____ Level 8 Retreat _____ Level 9 Retreat _____

Confirmation Retreat _____ Peer Leadership for Retreats _____

Youth Ministry Meetings – 1st. Sunday of the Month at 12:30 PM (except Holidays) _____

Bible Study – Last Sunday of the Month at 12:30 PM (except Holidays) _____

****PLEASE WATCH BULLETIN & BULLETIN BOARD FOR NEW UPCOMING EVENTS****

Please make check(s) payable to: Corpus Christi Church

For office use only

____ GOF Registration Date _____ \$ _____ Check # _____ Cash _____

1st. Eucharist Registration _____ 1st. Reconciliation Registration _____ Check # _____ Cash _____

Confirmation Registration _____ Check # _____ Cash _____