CATHOLIC COMMUNITIES OF ST. PETER & ST. MARY
2025-2026 FAITH FORMATION REGISTRATION FORM

Date: _____

Student 1
Name: _____
first middle last

Student e-mail: _____ Student cell: _____

Birthdate: _____ Grade: _____ Male/Female

Received Sacraments? Baptism yes/no Reconciliation yes/no
First Communion yes/no Confirmation yes/no

Any allergies or special needs: _____

Student(s) address: _____
street or PO Box city state zip

Student 2
Name: _____
first middle last

Student e-mail: _____ Student cell: _____

Birthdate: _____ Grade: _____ Male/Female

Received Sacraments? Baptism yes/no Reconciliation yes/no
First Communion yes/no Confirmation yes/no

Any allergies or special needs: _____

Student 3
Name: _____
first middle last

Student e-mail: _____ Student cell: _____

Birthdate: _____ Grade: _____ Male/Female

Received Sacraments? Baptism yes/no Reconciliation yes/no
First Communion yes/no Confirmation yes/no

Any allergies or special needs: _____

Please see reverse side to complete information.

Student 4

Name: _____
first middle last

Student e-mail: _____ Student cell: _____

Birthdate: _____ Grade: _____ Male/Female

Received Sacraments? Baptism yes/no Reconciliation yes/no
First Communion yes/no Confirmation yes/no

Any allergies or special needs: _____

Provide as much contact information as possible so that we can keep you updated on student activities!

Parent e-mail: _____ Home phone number: _____

Father's Name: _____ cell: _____

Mother's Name: _____ cell: _____

Student lives with: circle one Father Mother Both

Father's Religious Affiliation: _____ Mother's Religious Affiliation: _____

Family is registered at: ***circle one*** **St. Peter's**, **St. Mary's, Other**:_____

Emergency Contact: _____
name relationship phone

Please Initial

_____ *I am aware that the Diocese of Crookston requires that all of our Catechists and Employees be Safe Environment trained and have background checks done.*

_____ *If my child(ren) is photographed during a parish or youth activity, I give permission for the photograph to be posted on the parish video screen, published in Diocese publications, local newspaper, St. Peter & St. Mary Flocknote & website, or reproduced in parish news.*

_____ *I give permission for my child(ren) to leave the church grounds for Field Trips with Safe Environment trained adults. ie: nursing home, food shelf…*

Parent Signature: _____

$20 per child registration fee or $50 for families with 3 or more children in Faith Formation. Make checks payable to St. Peter's.