St. Vincent Ferrer Faith Formation Registration Form 2023-24

Family Name		Prefer	red Phone#		Emai	l			
Address		City/S	State/Zip						
Registered at St. Vincent Fer	rer Parish? Y	/ N Env#	#	_ If not St	. Vincent Ferrer, wh	ich parish? _			
Father: First and Last Name		Religion _		Con	tact Phone#				
Mother: First and Last Name		Maiden N	lame		Religion	Con	tact Phone#		
Emergency Contact:	Cor		ntact#	tact#Relationship _					
Name and Address if mail sho	ould go to a non-	custodial pare	ent: Name _			Con	tact#		
Address					Email				
Child's Name	Gender	Birthdate	Grade in Fall	School	Baptism Date Church & City	Reconciliation YorN	First Eucharist Date	Confirmation Date	
(include last name if different)					,				
				Please ch	eck all that apply:				
Please specify if child/ren have any special needs (medical, learning, etc.)				2 p	2 parents at home St		Step parer	ıt(s) name	
				Par	ents divorced or sepa	arated			
Child's name Special need			Par	Parents share joint custody					
					Sole custody to				
Child's name	Special need				Mother or father deceased Child/ren live with adult other than parent				
					idiren iive with adult (ouler man par	CIIL		

St. Vincent Ferrer Tuition Rates for 2023/2024

Material Costs for the following Sacramental Prep One Student: \$125.00 Two Students: \$150.00 Reconciliation/First Eucharist: \$50 Three Students: \$175.00 Confirmation \$75 (Tuition is capped at \$175.00 if more than 3 students) If you are new to St. Vincent Ferrer Faith Formation Program, at which parish did your child/ren participate in a Religious Education program last year? Church name & city Payment is due in full by December 1, 2023. For questions regarding our Payment can be made at the Faith Formation office during office hours or through our Faith website: stvincentferrer.net using Simply Said Secure Donations Site (under the donations tab) **Formation** Number of Children in program Tuition: Program, Additional Material fee for Sacraments please contact Reconciliation/First Eucharist for child/ren our Faith **Formation** for child/ren Confirmation Office at **TOTAL DUE** 248-398-1743. FOR OFFICE USE ONLY: Payment date Payment type Amount paid Balance owed Receipt # Faith Formation Office opens September 11, 2023 Cash. Check online **Submit forms to Faith Formation Office by September 30** I have read and understand the information provided Parent signature Date Printed Name

Media Consent Form

St. Vincent Ferrer Faith Formation Program engages in various correspondence and publicity with families, parishioners and other members of the community regarding various aspects of this program. Parents are given the option of authorizing the use of their children's photos with or without names for those purposes, I they so desire.

If you wish to provide authorization, please complete the information below.

St. Vincent Ferrer Church, Madison Heights

	Student's Name	Grade	Date of Birth
Parents ma Church at	ay cancel this authorization at any time b	by providing written noti	ce to St. Vincent Ferrer
St. Vinc	ent Ferrer Church 28353 Herbert St. I	Madison Heights, MI 4	18071.
relation	Video/Photogr permission for my child to be photograph s, not-for-profit use such as newsletter a s in our Family of parishes, community	articles, St. Vincent Fe	rrer bulletins, bulletins for
Signatures:	By:(Signature of Parent or Guardian)	Date	According to the state of the s
	(Signature of Parent or Guardian)		
	Name:(Printed-Parent or Guardian)		
	(Filliteu-Falentoi Guardian)		
	ion, I give permission for my child's na edfor community relations/PR purposes		child's photo or video to be
Signatures:			
	By:(Signature of Parent or Guardian)	Date	
	(Signature of Parent or Guardian)		
	Name:		

(Printed of Parent or Guardian)