

Mary Queen Of Peace

2017-2018

Faith Formation (PreK-6) & **EDGE** (7-8) & High School Youth Registration Form



Parent/Guardian(s) _____

Address _____ Zip Code _____

Home Phone _____ Cell Phone _____ E-mail _____

Emergency Contact: _____

Name

Number

Relationship

Sacraments received:

Child's First/Last Name	Age/ Grade	DOB	Baptism Date/ Place <i>*Baptismal certificate needed to receive Sacraments</i>	First Communion (date & place)	Confirmation (date & place)	First Reconciliation (date & place)	Years in CGS Atrium
	/						
	/						
	/						
	/						
	/						

Does your child(ren) have any special needs (ie: **asthma, diabetes, allergies**)? Please list who and what the need is:

The success of our education program depends upon your participation. **Please check** a way(s) in which you would like to help build our faith community:

Teacher ___ Teacher's Assistant___ Sub Teach___ Religious Education Commission___ Music Time___
Snacks___ Craft Supplies___ Children's Liturgy (during Mass)___ Other?_____

Please return this form to Daphne Sutton, DRE for Mary Queen of Peace with any questions 210 S. 34th Street, 59101 or call **294-7607** or mqp.dre@gmail.com

*Mark the best way to contact you, ie: cell phone, email, snail mail, with a star please.

**There is a registration fee of \$20 per family. Please enclose with form.
Sacramental Prep kids, extra one-time fee of \$20 for their very own hardcover Bible.
(Must be same edition as class)
Please see me if this is a hardship.**