



FAITH FORMATION

Registration-2024-2025—Grades 1-11

Church of Saint Joseph

12 West Minnesota Street--Saint Joseph, Minnesota, 56374

320-363-7505 ext. 533. ffdirector@churchstjoseph.org

PART I: Registration PLEASE PRINT CLEARLY

Parent Name(s): _____

Street Address: _____ City and Zip Code: _____

Mother's Phone: _____ Father's Phone: _____

Preferred E-mail: _____

Alternate Emergency Contact: _____ Phone: _____

Are you parishioners of the Church of Saint Joseph? Yes No

If not, please note the parish where you are registered members:

Church _____ City _____

Name of Child _____

Grade _____ (School Year: 2024-2025) Birthday _____ Gender: M F

School Attending _____ *Month / Day / Year*

Special Needs _____

Sacraments Already Received: Baptism First Reconciliation First Eucharist Confirmation

Name of Child _____

Grade _____ (School Year: 2024-2025) Birthday _____ Gender: M F

School Attending _____ *Month / Day / Year*

Special Needs _____

Sacraments Already Received: Baptism First Reconciliation First Eucharist Confirmation

Name of Child _____

Grade _____ (School Year: 2024-2025) Birthday _____ Gender: M F

School Attending _____ *Month / Day / Year*

Special Needs _____

Sacraments Already Received: Baptism First Reconciliation First Eucharist Confirmation

Name of Child _____

Grade _____ (School Year: 2024-2025) Birthday _____ Gender: M F

School Attending _____ *Month / Day / Year*

Special Needs _____

Sacraments Already Received: Baptism First Reconciliation First Eucharist Confirmation

PART II: General Information

Liturgy of the Word for Children: Pre-K/K	Scheduled Sundays during the 10:00 am Mass
Grades 1-8	Scheduled Sundays: 8:45-9:45 am
Grades 9-10-11 (Confirmation—Tracks I, II, III)	Scheduled Sundays: 6:30-8:00 pm
Youth Group Night for Grades 6-12	Scheduled Wednesdays: 6:30-8:30 pm

PART III: Parent Consent Form

I realize that photographs, videos, written extractions, and voice recordings of program participants may be taken during various activities for the purpose of illustrations, publications, and websites.

- I hereby authorize and give full consent to the Church of Saint Joseph, St. Joseph to publish and copyright all photographs, videos, written extractions, and voice recordings in which my child appears while enrolled as a participant in the youth/parish events.
- I do not consent to the photographs, videos, written extractions, and voice recordings release.

Name of Child Participant: _____

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date Signed: _____

PART III: Faith Formation Team

___ Liturgy of the Word for Children

___ Catechist (Grades 1-4)

___ Catechist (Grades 5-8)

___ Catechist Assistant (Grades 1-8)

___ Substitute Catechist (Grades 1-8) (on call).

___ COR Team Small Group Leader (Grades 9-11)

___ Assist with Youth Nights

___ Assist with the Living Rosary

___ Assist with the Confirmation Retreat

___ Assist with the Baccalaureate Brunch

___ Assist as Needed (Projects-Events)

___ Assist with Adult Faith Formation Events

With **gratitude** due to the generosity of parishioners,
there is **no cost** to families enrolled in faith formation for 2024-2025.

Please return your completed form no later than

Friday, August 30, 2024.

Mail to: Faith Formation 12 West Minnesota Street St. Joseph, MN 56374
or put the completed form in the parish office
drop box located inside the first door of the parish office building. Thank you.