

# GOOD SHEPHERD FAITH FORMATION

## 7th and 8th Grade Registration Form

### 2009-2010

<b>Office Use Only:</b>	
Date Pd _____	
Session _____	
Amt Paid _____	
Clk# _____	Cash _____

TODAYS DATE \_\_\_\_\_

Youth Name \_\_\_\_\_  
(Last Name) (First Name)

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Male \_\_\_\_ Female \_\_\_\_ Age \_\_\_\_ Grade \_\_\_\_  
Month Day Year

Birth Place (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Country) \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Name of School \_\_\_\_\_

Baptized? Yes \_\_\_\_ No \_\_\_\_ \_\_\_\_\_  
Name of Church City/State Date / /

1st Communion? Yes \_\_\_\_ No \_\_\_\_ \_\_\_\_\_  
Name of Church City/State Date / /

**\*\* NEW STUDENTS -Copies of Sacramental certificates must accompany registration form unless the sacrament was received at Good Shepherd**

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**REGISTRATION FEE: One Child = \$65 Two Children = \$95 Three Children = \$115**  
 (For Children who need to be Baptized or receive First Eucharist please call the office @ 271-8769 for fee information)

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**Please make a checkmark on your preference for the day you would like your child to attend:**

Monday—6:30 to 8:00 pm       Wednesday—6:30 to 8:00 pm

*For Office Use Only:*

Baptismal Certificate Attached: Yes \_\_\_\_ No \_\_\_\_ Eucharist Certificate Attached: Yes \_\_\_\_ No \_\_\_\_

(Over)