St. Andrew's Church
Christian Formation Registration 2019-20

631 N. Jefferson St.
Roanoke, VA 24016
Phone # (540)344-9814 ~ Email kboyer@standrewsva.org

Parent's Names: _____
Last First

Address: _____
Home Phone # _____ Family email: _____
Work # - Mother: _____ Father: _____
Custodial Parent, if different than above: _____

☐ Please check here if address or phone number has changed.

Student Information - **Christian Formation** – Sunday morning

First **Last** **DOB** **Grade & School Name** (Fall 2019)

1. Name: _____
   Sacraments received in the Catholic Church: ___Baptism ___Reconciliation ___Eucharist ___Confirmation

2. Name: _____
   Sacraments received in the Catholic Church: ___Baptism ___Reconciliation ___Eucharist ___Confirmation

3. Name: _____
   Sacraments received in the Catholic Church: ___Baptism ___Reconciliation ___Eucharist ___Confirmation

4. Name: _____
   Sacraments received in the Catholic Church: ___Baptism ___Reconciliation ___Eucharist ___Confirmation

Student Information - **Sacramental Preparation*** – as scheduled

First Last Grade & School Name

1. Name: _____
   ___First Reconciliation/First Communion (grade 2) ___Confirmation (grade 10)

2. Name: _____
   ___First Reconciliation/First Communion (grade 2) ___Confirmation (grade 10)

** Sacramental preparation is a separate program. Children preparing for sacraments should have completed a minimum of 2 years of Religious Education. RCS students are still required to attend Sacramental Preparation, per Diocesan guidelines.*

Christian Formation fee:	Grade K-12 **(if paid before 8/1/19)**	$25.00 per student _____
	(if paid after 8/1/19)	$40.00 per student _____
Sacramental fee:	First Reconciliation ($20) & First Communion ($20)	$40.00 per student _____
	Confirmation	$40.00 per student _____
		TOTAL $_____

☐ I have paid ONLINE using St. Andrew's "Online Giving" option

☐ I have enclosed payment

_____
Signature of Parent or Guardian

I would be happy to assist with: ___Teaching ___Aide ___Children's Liturgy ___Youth Ministry
___ First Reconciliation/First Communion ___Confirmation

For office use only: Date rec'd _____ Check #_____ Amt _____ By_____