## **2024-2025** REGISTRATION FOR FIRST COMMUNION YEAR 1

## FAITH FORMATION PROGRAM AT ST. MARY'S BY THE SEA

Last Name			Family Reg#
			Registered Parishioner of
			St. Mary's: Y□ N□
Student Name			
Street Address			Apt. #
City Zip	Code	Phone <u>(</u>	)
Date of			
Birth/ City/State	of Birth		
School	_		Grade
Disabilities/Special Learning Requirements			
Father		Cell Phone (	)
Mother			•
Emergency Contact			
Sibling enrolled in FFP? Y□ N□ Na			
<ul> <li>Actively participate with the class</li> <li>Attend Parent/student meeting on Saturd</li> <li>First Class, Monday, September 25, 3:30</li> <li>Parent/Legal Guardian Signature</li> </ul>	)pm-4:30pm.	·	
	Liability Waive	r	
As a condition of my child being allowed to participate constituent organizations, including but not limited to the employees and volunteers from any and all claims for participate.	in planned activities, le Roman Catholic Bis	- I hereby release and d shop of Orange, a Cor	poration Sole, and their officers,
Total Amount Due: □check □online □cash			
\$100 Registration & FHC Retreat Register by July 31, 2023.  Please provide a copy of Baptism			
	For Op	FICE USE ONLY	
	<u>Date</u>	<u>Pymt</u>	<u>Ck/Cash</u> <u>Balance</u>