

Registration Form

Children's Faith Formation

Pre-K through 5th Grade

Name of Child: _____

Grade: K 1 2 3 4 5

Parent Email: _____

Phone: _____

Address: _____

City: _____ Zip: _____



3RD - 5TH GRADE

Is this child new to the program this year? YES NO

Family members for breakfast? _____
(including your child)

First Reconciliation & First Communion



2ND OR 3RD GRADE

Has your child been baptized? YES NO

Is your family registered in the parish? YES NO

Is childcare needed? (18 months +) YES NO

If yes, name of child: _____

Name of parent(s) attending: _____

KIDS' SMALL GROUPS

KINDERGARTEN - 5TH GRADE



VBS and LIFE programs register separately during other times of the year. Time Travelers do not need registration.

Please return this form to the church office and/or email susan@svdpks.org if you have any questions regarding the children's programs.