

Immaculate Heart of Mary Church

2017/2018

Faith Formation Registration

Please return completed registration by September 5th

Religious Education (1st through 9th Grade) please complete pages 1, 2, 3 & 4
 Sacraments (First Reconciliation and First Eucharist): please complete pages 1, 2, & 4

Are you registered in this parish? YES NO

CHILD(REN) LIVE WITH: (Check all that apply)

Both Parents Mother Father

Stepparent Guardian Other

If OTHER, please specify, _____

FATHER FIRST NAME MOTHER FIRST NAME FAMILY LAST NAME

MAILING ADDRESS

STREET

CITY

ZIP CODE

MAIN CONTACT NUMBER
HOME OR CELL PHONE

FATHER
DAY PHONE

CELL PHONE

MOTHER
DAY PHONE

CELL PHONE

Preferred method of communication, please provide an email address that you check on a regular basis

PARENT'S EMAIL ADDRESS:

Mother _____ Father _____

Family Information	1 st Child	2 nd Child	3 rd Child	4 th Child
First Name				
Last Name				
Grade in 17/18				
School in 17/18				
Birth Date				
Gender				

So we can better server your child, please list any special needs

(For example, developmental or learning disabilities, autism, ADHD, physical restrictions, diabetes, seizures, asthma, food and other allergies, etc.)

Special Needs Disabilities Medical Concerns Food Allergies				
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RELIGIOUS EDUCATION GRADES 1-9 REGISTRATION

Class Information	1 st Child	2 nd Child	3 rd Child	4 th Child
First Name				
Last Name				
RE Grade in 17/18				

RELIGIOUS EDUCATION MATERIALS FEE: \$30 PER STUDENT

TOTAL AMOUNT FOR RELIGIOUS EDUCATION: (Enter this amount on Page 4) _____

SACRAMENTAL PROGRAM REGISTRATION

FIRST RECONCILIATION REGISTRATION - FALL, 2017

Preparation for First Reconciliation occurs about the age of 7 (2nd grade and older) and consists of 6 lessons taught by the parents at home. Parents are required to attend an orientation session for their child. Children will meet briefly prior to the reception of the sacrament during a communal reconciliation service during Advent.

CHILD'S FIRST NAME

MIDDLE NAME

LAST NAME

Baptized at IHM

Baptized in another church
(A photocopy of the baptismal certificate will be needed)

Certificate already on file at IHM

FIRST EUCHARIST REGISTRATION - SPRING, 2018

Preparation for First Eucharist occurs about the age of 7 (2nd grade and older) and consists of 6 lessons taught by the parents at home. Parents are required to attend an orientation session for their child. There is also a Parent/Child prep/rehearsal night to prepare for the sacrament of Eucharist. Preparation starts mid winter with a group celebration during the Easter Season. First Reconciliation takes place in the fall before First Eucharist.

CHILD'S FIRST NAME

MIDDLE NAME

LAST NAME

Baptized at IHM

Baptized in another church
(A photocopy of the baptismal certificate will be needed)

Certificate already on file at IHM

SACRAMENTAL PREPARATION FEES:

\$30 First Reconciliation (per child)

\$ _____

\$30 First Eucharist (per child)

\$ _____

Total amount for Sacramental Preparation

\$ _____

(Enter this total on page 4)

SHARED MINISTRIES

Volunteer Opportunities

Each family is encouraged to share their time and talents in some way with the program.
We also welcome teen volunteers. Please check the appropriate boxes.

Parent Name (A) _____ Parent Name (B) _____

Teen Name (C) _____ Teen Name (D) _____

FAITH FORMATION VOLUNTEERS

A B C D

 RELIGIOUS EDUCATION TEACHER GRADE: _____
Grades 1 through 9 WED 6:30-7:30 PM (Must be 18 or Older)

 SUBSTITUTE TEACHER ____ GR 2-6 ____ GR 7-9

 TEACHER'S ASSISTANT 6:30 PM WED
To work one-on-one with a special needs child in the classroom
(Must be 16 or older)

 HALL MONITOR 6:15-7:30 PM WED (1-3 times/year during class time)
(monitor doors, monitor/assist with special sessions)

 ATTENDANCE CLERK 6:30 WED
20 hours per year (make phone calls)

 CHILDREN'S LITURGY OF THE WORD
ADULT PRAYER LEADERS SUNDAY 10:30 A.M. MASS

 CHILDREN'S LITURGY OF THE WORD
YOUTH PRAYER LEADER (6th grade and up)
SUNDAY 10:30 A.M. MASS

 CHILDREN'S LITURGY OF THE WORD
MUSIC PRAYER LEADER
VOCAL AND/OR INSTRUMENTAL (GUITAR)

RELIGIOUS EDUCATION & SACRAMENTAL FEES

Religious Education Fee \$ _____

Sacramental Fee \$ _____

TOTAL \$ _____

AMOUNT ENCLOSED \$ _____

Please mark your payment selection

1. Paid in full at time of registration.
2. Quarterly withdrawal on Sept. 15, Nov. 15, Jan. 15, & March 15.
3. 7 monthly withdrawals beginning Sept. 15 through March 15.

By enrolling my child/children in Immaculate Heart of Mary Parish programs, I accept the commitment of paying program fees. I will fulfill this financial obligation as I have specified.

Print Name

Parent Signature

Financial aid is available for part or all of the programs. If you need financial assistance, please contact the Faith Formation Coordinator. This will be kept confidential.

MEDIA RELEASE:

I grant permission to IHM to use pictures/images of my child(ren) in bulletin, website and marketing materials.

(Child's Name)

(Child's Name)

(Child's Name)

(Child's Name)

Parent Signature

Office Use Only:

Date Received: _____ Check # _____ Amount Paid _____ GL Acct. _____

EFT _____ Monthly _____ Quarterly _____

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