

Faith Formation

Registration: 2025-26 | Pre-K through Grade 11

St. John the Baptist Parish

14241 Fruit Farm Road | St. Joseph, MN 56374 | (320) 363-2569

This form must be <u>completed and returned with payment by August 22nd.</u> Thank you for getting in on time.

Please PRINT clearly

PART I: Registration

Parent Name(s):						
Street Address:						
Mother's Phone #: Home:	_Cell:					
Father's Phone #: Home:	_ Cell:					
Preferred E-Mail:						
Alternate Emergency Contact:						
Are you parishioners of the Church of St. John the Baptist? _	Yes No					
Student Information						
1. Name of Child:						
Birth Date:/ School:						
Sacraments already received: □ Baptism □ First Reconciliation □ First Eucharist □ Confirmation						
Special Things to Know:						
2. Name of Child:						
Birth Date:/School:	2025-26 Grade: Gender: M F					
Sacraments already received: \Box Baptism \Box First Reconciliation \Box First B	Eucharist Confirmation					
Special Things to Know:						
3. Name of Child:						
Birth Date:/ School:	2025-26 Grade: Gender: M F					
Sacraments already received: ☐ Baptism ☐ First Reconciliation ☐ First Eucharist ☐ Confirmation						
Special Things to Know:						

PART II: Volunteer to be a part of our **Faith Formation Teachers, Helpers or Committee Members**

□ Catechist 100% Tuition Credit and Grade Preference:
☐ Helper 50% Tuition Credit and Grade Preference:
□ Faith Formation Committee Member (Meets 4-6 times a year) 20% credit

PART III: General Information

Pre-K through Grades 10 meet at our Parish Center from 8:30-10:45 AM on scheduled Sundays (8:30 AM mass followed by sessions)

Faith Formation Families attend mass together and parents are highly encouraged to stay for adult speakers.

PART IV: Fees

Tuition	COST PER CHILD	# OF CHILDREN	TOTAL COST (cost/student times # of students)		
Preschool program (age 3-Kindergarten)	\$50.00	Х	=		
Grades 1-11 Faith Formation	\$50.00	Х	=		
Non-parish member fee (Please note we appreciate all the additional time you volunteer time and talent by assisting in various activities.)	\$50.00	Х	=		
*Catechist Credit (100% for Catechist, 50% for Helper, 20% Committee Member) *see Part II			(Subtract)		
If payment of fees presents a difficulty for your family, please parish office for scholarship information before Aug. 22.		Total Amount:			

Please return completed form and pay	<u>/ment</u> to the parish office by	ı <u>August 22, 2025. </u> Checks shoul	ld be made out to St. Jol
	the Baptist Ch	urch.	
***I understand that when participatin photographed for print, video, social med other published formats for St. John the Ba	dia, or electronic imaging. I ut		
Signature of Parent		Date	
***Your signature gives your child(ren) per may take place away from the parish site. I a parent or legal guardian, you remain lega Signature of Parent	The activity will take place unde ally responsible for any persona	r the guidance and direction of volu l actions taken by your child.	unteers from the parish. As
OFFICE USE: Date registration Received:			
	OFFICE USE ONLY		