

HOLY ROSARY CHRISTIAN FORMATION REGISTRATION 2025-2026

(PLEASE PRINT)

Family Name: _____

Address: _____

Mother's Name: _____

Phone:(home) _____ (work) _____

Father's Name: _____

Phone:(home) _____ (work) _____

email: _____

Are you a registered member of Holy Rosary: Yes _____ No _____

If you are not a registered member of this parish, please see Sr. Tsega for a registration form.

FEES: Registration \$20 per child (maximum of \$80 per family). Children in 2nd Grade and 10th add an additional \$10 for Sacrament Fees. Please make checks payable to "Holy Rosary" or pay on HRCC website under e-giving/Religious Education registration fee. If this fee presents a financial hardship for your family, please contact Fr. Tochi.

Please complete the information below for the Christian Formation Program. Return completed forms as soon as possible.

GRADES K THROUGH 8th Classroom Sessions SUNDAY 9:30-10:45 AM AM

NAME: _____

First MI Last Nickname

GRADE SEPT. 2025-26: _____ School _____

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

NAME: _____

First MI Last Nickname

GRADE SEPT. 2025-26: _____ School _____

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

NAME: _____

First MI Last Nickname

GRADE SEPT. 2025-26: _____ School _____

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

Does your child/children have food allergies _____

GRADES 9th-12th Classroom Session SUNDAY 9:30-10:45AM

NAME: _____

First MI Last Nickname

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

NAME: _____

First MI Last Nickname

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

NAME: _____

First MI Last Nickname

DATE OF BIRTH: _____

SACRAMENTS (Circle all sacraments celebrated to date):

BAPTISM CONFIRMATION EUCHARIST RECONCILIATION

For office use only: REC'D _____ AM'T _____ CHECK #
_____ BY _____

Volunteer Position (Encouraged of all parents with children in the Christian Formation Program):

Name: _____

Please check at least three position:

All adults with children enrolled in Christian Formation are encouraged to volunteer time during the year.

All adults who work with or around children are required to complete background screening and attend a Virtus "Protecting God's Children" Awareness Session within two months of volunteering.

- ❶ The following Volunteer Position will be assigned on a rotating basis and one can expect to serve at least once a month.

____ **Substitute Catechists** Fill in as a Catechist on an as needed basis.

- ❷ The following Volunteer Position will require assistance approximately 5 times a year.

____ **Hospitality Team** Assist with the details of and staff Sacramental Receptions, Retreats, and other Activities as needed.

- ❸ The following Volunteer Position in addition to the background screening and Protecting God's Children Awareness Session requires one to be a fully initiated Catholic in good Standing and participation in Catechist Formation (Workshops, training, planning, and Pathways).

____ **Lead Catechists** (One per class) Prepare and present lessons to assigned grade level with help of assigned Catechist.

____ **Catechists** (One per class) Work with Lead Catechist in preparing and presenting lessons to assigned grade level.