

***Cresson Catholic Community Faith Formation Religious Education Program – Registration***  
***Father Leo Arnone ~ Pastor 814-886-2374***  
***Director of Religious Education;– Deb Baker 814-886-7504***

Family Name \_\_\_\_\_ Registered Parish (circle one) SA FX

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Father s name \_\_\_\_\_ Cell # \_\_\_\_\_

Mothers Name \_\_\_\_\_ (maiden name) \_\_\_\_\_ Cell# \_\_\_\_\_

Home Phone \_\_\_\_\_

Email address \_\_\_\_\_

**Family Church Membership Number** \_\_\_\_\_  
 (Envelope Number) Necessary to enroll in our program

Childs Name	Grade (fall of 2021)	DOB	Baptismal Church	Indicate CCD/ 2 <sup>nd</sup> grade Sacramental Prep /Confirmation Prep

**Field Trip/Photography Consent:**

I/we the parents of this student request that the Cresson Catholic Community Faith Formation program allow my son/daughter to participate in outside activities that include leaving the school building & walking to the Church Building & church grounds. This activity will always be under the supervision of the students Religious Education teacher. I also give permission for my child’s photo to be taken and displayed on the church bulletin board, catholic register or website.

Parent Signature \_\_\_\_\_

**Volunteer Opportunities**

We always are in need of volunteers for our CCD Program. If you are willing to share your time, please circle the areas of interest you have:

*Catechist/Teacher*

*Substitute Teacher*

**Registration Fee**

\$25 per student  check  cash

\$15 per child for additional children

If this fee causes a financial burden, please let us know.

**Parent Promise Contract**

*\*By signing this registration form, we the parents of the child/ren listed understand that we are partners in the faith education of our children and take that responsibility seriously. We have read the Parent and Student Policies of the Cresson Catholic Community Religious Education Program and understand and agree with the policies as well as the operational rules of the program. We agree to have our children attend weekly CCD classes, my role as parent/catechist includes attending Mass weekly & Holy Days of Obligation, praying with my child/ren regularly, and making a good faith attempt at homework given.*

*Parent Guardian Signature* \_\_\_\_\_

\_\_\_\_\_ *Date* \_\_\_\_\_