

GENERATIONS OF FAITH REGISTRATION FORM 2010-2011

THEME: JUSTICE & SERVICE

<p>*#1PASS (ALL FAITH FESTS-2010-2011)</p> <p>Household size 4 or more Season Pass = \$185.00/yr Household size 2-3 people Season Pass = \$135.00/yr. Individual Season Pass = \$75.00/yr</p> <p>*#2PASS Holy Trinity Triple Play \$30.00/one person (attend any 3 in year) \$50.00/2-3 persons \$75.00/4+ persons</p>	<p style="text-align: center;">CHECKS PAYABLE TO: SACRED HEART</p> <p style="text-align: center;"><i>As always, no one will be turned away due to inability to pay. Scholarships available through this office.</i></p> <p>*#1 Required PASS if preparing for Sacraments* (2yr Diocesan requirement)</p> <p>*#2 Required PASS for Catholic School students</p> <p style="text-align: center;">These fees include all mailings, meals, events, and materials for Faith Fests</p>
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FAITH FORMATION OFFICE USE ONLY	
PASS #__ @ amt: _____ Amt. Paid _____ Bal due1 _____	_____pymt2 date _____ _____pymt3 date _____
Cash _____1_____2 (initials of person giving \$)	
Pymts: Check1# _____amt. _____date _____	Check2# _____amt. _____date _____
Reg DATE: _____	REGISTRAR: _____ (initials)
<input type="checkbox"/> computer input <input type="checkbox"/> email/outlook input <input type="checkbox"/> name tags made _____	

PLEASE NOTE CHANGES THIS YEAR: Registered with Parish? Yes/No Address changed? Yes/No

Household Last Name _____ Phone _____ * Email _____

Address _____ PHONE change? Yes/No EMAIL change? Yes/No
 Number and Street Name _____ City _____ Zip code _____ **We will email you with info**

List All Household Members (Grade'10-'11; Adults grade=A)

First Name (last name if different from above)	M/F	Grade	Birthdate	First Name (last name if different from above)	M/F	Grade	Birthdate
1. _____	_____	_____	_____	5. _____	_____	_____	_____
2. _____	_____	_____	_____	6. _____	_____	_____	_____
3. _____	_____	_____	_____	7. _____	_____	_____	_____
4. _____	_____	_____	_____	8. _____	_____	_____	_____

Please circle one Faith Fest day that you will attend monthly.

Mondays 6:00pm-8:30pm

Tuesdays 6:00-8:30pm

Fridays 6:00-8:30pm

Please indicate if you have a household member above that needs one of the following sacraments. (Classes are not held during the week of Faith Fests)

Name	Birth date	Circle Sacraments Needed			Class scheduled day / next year for sacrament?
_____	____/____/____	Baptism	1 st Penance	1 st Communion	Confirmation _____
_____	____/____/____	Baptism	1 st Penance	1 st Communion	Confirmation _____
_____	____/____/____	Baptism	1 st Penance	1 st Communion	Confirmation _____

Any special needs of students (allergies, etc.)

[Adult/Parent cellphone:

classtime emergency contact]

MORE INFORMATION ON BACK OF FORM

Generations of Faith Registration Form Faith Fest Volunteer and Assistance

(BACK OF FORM)

**Sorry, I can't volunteer my time but I can
give this additional amount \$ _____**

(include this in your check)

**The *Generations* Program is dependent upon the support of volunteers.
You and your family can assist on the day you are registered.**

Please put the NAME OF PERSON interested next to activity or area.

FORMATION AREAS

<u>Leader</u>	<u>Area</u>	<u>Asst Leader</u>
_____	Pre-school	_____
_____	Elementary	_____
_____	Middle School	_____
_____	High School	_____
_____	Adult	_____

HOSPITALITY AREAS

Cook _____
 Cook _____
 Meal Server _____
 Opening Prayer Leader _____
 Closing Prayer Leader _____
 Coordinator of: _____
 1 Seater/Greeter _____
 2 Tabletop setup _____
 3 Clean-up _____

SUPPORT AREAS

Musician _____
 Vocal _____
 Instrument _____
 Newsletter _____
 Banner maker _____
 Misc. Office _____
 Planning Team _____

I am not sure where I can help at this time. Please contact me when the need arises.

Name _____ email _____ phone _____
 Name _____ email _____ phone _____

***You will be notified by email or phone.**