

**St. Mary on the Lake Parish Manitou Beach  
Faith Formation Registration  
2023-2024**

Family Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Father's Info:

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Mother's Info:

Name: \_\_\_\_\_

E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Are you a registered member of St. Mary on the Lake Manitou Beach?     Yes     No

**Emergency Info if parent cannot be reached:**

For our records and for any possible emergencies that may arise, we ask that you fill out and sign this form.

I understand that the Faith Formation program will take place on parish grounds and that my child(ren) will be under the supervision of authorized parish personnel and volunteers. In case of an emergency, I grant permission to transport my child to the closest hospital for emergency medical or surgical treatment. I will be contacted as soon as possible and will be advised prior to any treatment by the hospital or doctor.

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Family Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company & Plan Number: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PHOTO RELEASE:**

\_\_\_\_\_ Yes, I hereby grant St. Mary on the Lake Parish Manitou Beach the right and permission to use photographic pictures of my child. Photos may be used for marketing purposes, such as in the church, bulletin, displays, diocesan and/or parish websites and Facebook, FAITH Magazine, etc.

\_\_\_\_\_ No, I decline to have my child's photograph displayed; however, I do allow my child to be in unidentified group pictures with no names mentioned.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please complete the individual child information on reverse side.*

**Please list all children being registered for Faith Formation:**

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Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Sacraments Received:

\_\_\_\_\_ Baptism Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Reconciliation Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Communion Date & Church: \_\_\_\_\_

\_\_\_\_\_ Confirmation Date & Church: \_\_\_\_\_

Please note any allergies or specific conditions we need to be aware of: \_\_\_\_\_

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Sacraments Received:

\_\_\_\_\_ Baptism Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Reconciliation Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Communion Date & Church: \_\_\_\_\_

\_\_\_\_\_ Confirmation Date & Church: \_\_\_\_\_

Please note any allergies or specific conditions we need to be aware of: \_\_\_\_\_

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Sacraments Received:

\_\_\_\_\_ Baptism Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Reconciliation Date & Church: \_\_\_\_\_

\_\_\_\_\_ First Communion Date & Church: \_\_\_\_\_

\_\_\_\_\_ Confirmation Date & Church: \_\_\_\_\_

Please note any allergies or specific conditions we need to be aware of: \_\_\_\_\_

**For questions please contact the parish office at (517) 547-7496 or [ssinkovitz@saintmarymanitoubeach.org](mailto:ssinkovitz@saintmarymanitoubeach.org)**