



Children's Faith Formation Registration 2025-2026

Sunday mornings 9:30am-10:30am K3 - 12th Grade

****One registration form per family****

Family Information

Father/Guardian's Name:		Father/Guardian's Cell:	
Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Mother/Guardian's Name:		Mother/Guardian's Cell:	
Catholic? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Family E-mail:		Are you a registered parishioner? <input type="checkbox"/> yes <input type="checkbox"/> no	
Home Address:		City:	Zip:
Primary Contact Phone:	Emergency Contact (other than parent/guardians):	Emergency Contact Relationship to Child:	Emergency Contact Phone #:
Please list anyone authorized to pick up child from Faith Formation classes (must be at least 12 years old):			
Please list any additional information you would like us to know:			

A copy of the Baptismal Certificate must be included when registering for a sacramental prep class

Child Information

First Name:		Middle Name:	Last Name:
Gender: <input type="checkbox"/> male <input type="checkbox"/> female	Date of Birth:	Preferred Name:	Grade as of Fall 2024:
School Attending & Grade:	Baptism: <input type="checkbox"/> Yes <input type="checkbox"/> No First Communion: <input type="checkbox"/> Yes <input type="checkbox"/> No Confirmation: <input type="checkbox"/> Yes <input type="checkbox"/> No		My child is in need of a sacrament: <input type="checkbox"/> Yes <input type="checkbox"/> No Sacrament: _____
Register for: Faith Formation <input type="checkbox"/> Youth Group (6 th – 12 th grades ONLY) <input type="checkbox"/> Both FF & YG <input type="checkbox"/>	List any allergies, medical conditions, educational or behavioral needs:		

Child Information

First Name:		Middle Name:	Last Name:
Gender: <input type="checkbox"/> male <input type="checkbox"/> female	Date of Birth:	Preferred Name:	Grade as of Fall 2024:
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Liability Waiver (Signature Required)

I _____, as the parent or guardian for
Parent Name

Child Name(s)

A minor who is in my care and custody, release and discharge the Archdiocese of Mobile, Holy Spirit Parish (its pastors, employees, volunteers and agents, etc.) or any representatives associated with any ongoing scheduled activities from all damages, claims, suits, expenses, and payments for injury to my child and/or property, including all damages, claims, suits, expenses and payments resulting from negligence of the Archdiocese of Mobile, Holy Spirit Parish, and/or their officers, directors and employees. This liability waiver is effective from August 2025 to July 2026.

Parent/Guardian Signature:

Date:

Photograph and Video Consent (Signature Required for Consent)

As the legal guardian or custodial parent of: _____, I grant Holy Spirit Parish to use my child's photo or video on the Holy Spirit Parish website, bulletin, or official parish social media pages for the purposes of illustrating typical activities of the parish, its youth ministry and/or faith formation program.

Parent/Guardian Signature:

Date:

Parent Pledge (Signature Required)

In accordance with the Archbishop of the Archdiocese of Mobile, I have chosen to enroll the above-mentioned child(ren) to participate in Faith Formation at Holy Spirit Parish. I understand that I, as a parent or legal guardian of the child(ren) listed above, I am required to read the 2025-2026 Policies provided by the Faith Formation program. I understand to agree and abide by the guidelines, rules and regulations set forth in this document, including:

- Attendance Policy
- Arrival and Dismissal
- Pick Up Authorization
- Student Behavior and Expectations
- Class Cancellations
- Wellness/Covid Policy
- Communication
- Family Commitment

I understand that failure to comply with the family policies could bring about disciplinary actions including, in extreme cases, dismissal of my child from the Faith Formation program. I understand that I am responsible for sharing the rules, regulations and other important information in this document with my child.

Parent/Guardian Signature:

Date:

CONTACT INFORMATION:

Office of Faith Formation

dre@holyspiritmgm.org

334-277-1989

www.holyspiritmgm.org