

Registration for Blessed Sacrament Faith Formation _____

Please fill out all the information and return it digitally to Sister Jeanne Marie by _____ at jmvonderhaar@dioceseofgreensburg.org

Parents/guardian Name: Father _____

Mother _____

Phone # Home: _____

Cell # Father _____

Mother _____

Email Address Father _____

Email Address Mother _____

Address: Street: _____

City: _____ Zip _____

Emergency Contact: Name: _____ Relation _____

Phone: _____

Please list the child or children you wish to register and grade for September _____

Child #1: Name _____	Gr. _____	School _____
#2: Name _____	Gr. _____	School _____
#3: Name _____	Gr. _____	School _____
#4: Name _____	Gr. _____	School _____
#5: Name _____	Gr. _____	School _____

Any other information such as allergies and for which child?

_____ Candidate for First Eucharist in _____ Candidate for Confirmation _____

Registration fee, \$50.00 per child (\$100. per family School Year 2024-25).