



RESURRECTION CATHOLIC COMMUNITY

2021-2022 Faith Formation Registration for Grades K-12

7600 Soquel Drive (P.O. Box 87), Aptos, CA 95001 (831) 688-4300 Fax: (831) 688-6921
 Website: <https://resurrection-aptos.org> E-Mail: resurrectionparish@sbcglobal.net

Student's Name (Last, First, Middle)	M/F	Date of Birth	Current School	Grade	Years Attended FF or Catholic School
1.					
Sacrament(s) received: Baptism <input type="checkbox"/> Y <input type="checkbox"/> N 1st Eucharist <input type="checkbox"/> Y <input type="checkbox"/> N Reconciliation <input type="checkbox"/> Y <input type="checkbox"/> N Confirmation <input type="checkbox"/> Y <input type="checkbox"/> N					
Baptized at Resurrection <input type="checkbox"/> Y <input type="checkbox"/> N If not where:					
2.					
Sacrament(s) received: Baptism <input type="checkbox"/> Y <input type="checkbox"/> N 1st Eucharist <input type="checkbox"/> Y <input type="checkbox"/> N Reconciliation <input type="checkbox"/> Y <input type="checkbox"/> N Confirmation <input type="checkbox"/> Y <input type="checkbox"/> N					
Baptized at Resurrection <input type="checkbox"/> Y <input type="checkbox"/> N If not where:					
3.					
Sacrament(s) received: Baptism <input type="checkbox"/> Y <input type="checkbox"/> N 1st Eucharist <input type="checkbox"/> Y <input type="checkbox"/> N Reconciliation <input type="checkbox"/> Y <input type="checkbox"/> N Confirmation <input type="checkbox"/> Y <input type="checkbox"/> N					
Baptized at Resurrection <input type="checkbox"/> Y <input type="checkbox"/> N If not where:					
4.					
Sacrament(s) received: Baptism <input type="checkbox"/> Y <input type="checkbox"/> N 1st Eucharist <input type="checkbox"/> Y <input type="checkbox"/> N Reconciliation <input type="checkbox"/> Y <input type="checkbox"/> N Confirmation <input type="checkbox"/> Y <input type="checkbox"/> N					
Baptized at Resurrection <input type="checkbox"/> Y <input type="checkbox"/> N If not where:					

Address: _____

City: _____ Zip: _____

Phone: _____

Mother or Guardian: _____

Religion: _____

Cell #: _____

Email: _____

Father or Guardian: _____

Religion: _____

Cell #: _____

Email: _____

Child(ren) Primarily Reside(s) with:

- Both Parents Father Mother
 (In the same home)

Baptismal Certificates are required for all new students.

GRADES K-12 (Thursday classes & Youth Group) (does not include Sacrament Preparation)	
1 Child:	\$80
2 Children:	\$105
3 or More Children:	\$125
Home School option only (discount for additional children)	\$40
SACRAMENT PREPARATION FEES:	
1 st Eucharist and 1st Reconciliation Fee (Texts, Bible, Cross)	\$75
Confirmation Fee (includes High School Youth Group) Circle: 1st Year or 2nd Year	\$100
TOTAL:	

FOR OFFICE USE ONLY: date paid: _____ amount: _____ cash/check # _____ credit card

MR PR PDS: CO FO Initialed by: _____