

ST. JOHN VIANNEY FAITH FORMATION
1650 YGNACIO VALLEY ROAD
WALNUT CREEK, CA 94598

2018-2019

E-MAIL: faithformation@sjvianney.org PHONE: 925-939-7911 ext. 124

PLEASE PRINT CLEARLY

FAMILY NAME: _____

ADDRESS: _____

Primary Phone: _____

CITY: _____ ZIP: _____

Registered in the Parish: Yes No Would you like us to register you?

PARENTS/GUARDIANS INFORMATION *is considered CONFIDENTIAL and is used only for communication purposes by this office.*

Name: _____
First Last Maiden Name

Date of birth: _____

Relationship: _____
(Mother, Stepmother, Grandmother, Guardian, etc.)

Occupation: _____

Secondary Phone: () _____
 cell business

Email address: _____

Religion: Catholic Other _____

Marital Status: Married Divorced Single Widow(er)

Name: _____
First Last

Date of birth: _____

Relationship: _____
(Father, Stepfather, Grandfather, Guardian etc.)

Occupation: _____

Secondary Phone: () _____
 cell business

Email address: _____

Religion: Catholic Other _____

Students live with: Both Parents Guardian Father Mother

Child Information

Has child received the following Sacraments? Circle one that applies

Child's First and Last Name	Grade in 2018-19	Sex M / F	School	Birthdate	Baptised Roman Catholic	Reconciliation	Eucharist	Confirmation
					Yes No Interested	Yes No Interested	Yes No Interested	Yes No Interested
					Yes No Interested	Yes No Interested	Yes No Interested	Yes No Interested
					Yes No Interested	Yes No Interested	Yes No Interested	Yes No Interested

SACRAMENTS OF INITIATION: Sacrament preparation is separate from Faith Formation, requiring appropriate registration forms and fees. One year of previous faith formation is required.

****Baptism Certificate is required for registration unless child was baptized at Saint John Vianney**

Family Based Elementary . Student must be accompanied by an adult for each gathering. The gatherings are monthly October through May and include a meal. Each session reasonably accommodates 40 families.
 (Please indicate 1st, 2nd, and 3rd choice for day preference.)

1st Sun (Noon-2pm) 1st Thur (6-8pm) 2nd Tues (4-6pm)

Middle School Program Tuesday 7:00-8:30 pm

High School Program Sunday 6:30pm-8:00pm

HIGH SCHOOL ONLY :

Student's email address: _____

Student's cell phone: _____

Fees

Preschool

\$75.00 per student

Elementary/Middle/High School

1 student - \$110.00
 2 students - \$160.00
 3 or more students - \$220.00

Payable by check SJV or online scan the QR code on next page



A completed 2018 medical release form is required before any child is placed in the faith formation program. Please scan the QR Code to access the PDF form



For office use:

Total paid _____

Check # / cash _____

Date paid _____

Member # _____

Adult Ministries in Faith Formation: those ministries you would like to participate in.

Children's Liturgy of the Word (Sundays during 9:00 am or 11:00am Mass)

I would like to be a **CLW Catechist** I would like to be an **aide** **Name:** _____

Preschool (Sundays during 9:00 am Mass)

I would like to be a **Catechist** I would like to be an **aide** **Name:** _____

Elementary

I would like to be a **team member for students** I would like to be a **team leader for adults**
 1st Sun (Noon-2pm) 1st Thur (6-8pm) 2nd Tues (4-6pm) **Name:** _____

I would like to **assist in the Faith Formation office** (preparing materials, copying, etc.)
 Times that I am available _____ **Name:** _____

Middle School (Tuesday 7:00 – 8:30 pm)

I would like to be a **Catechist** **Name:** _____

High School Program (Sunday 6:30 – 8:00pm)

Name: _____

I would like to be a **Catechist** **Name:** _____

Student Ministries: those ministries you would like to participate in.

Altar Server (Grades 4-12) **Name** _____ **Grade** _____

Children's Choir 9AM Sunday (Grades 1-5) **Name** _____ **Grade** _____

Youth Choir 5PM Sunday (Grades 6-12) **Name** _____ **Grade** _____

Lector (Grades 3-12) **Name** _____ **Grade** _____

Children's Liturgy of the Word aide (Grades 4-12) **Name** _____ **Grade** _____

Catechist's aide in Faith Formation (Grades 6-12) **Name** _____ **Grade** _____
 CIRCLE ONE: PreSchool Middle School High School Family

Extraordinary Minister of the Eucharist (grades 9-12) **Name** _____ **Grade** _____