

**K4 and K5 LIFELONG FAITH FORMATION PROGRAM  
SAINT MARY PARISH – 2010-2011**

**Office Use Only**

Amt. Due: \_\_\_\_\_  
Date: \_\_\_\_\_  
Amt. Paid: \_\_\_\_\_  
Check #: \_\_\_\_\_  
Bal. Due: \_\_\_\_\_

Child's Full Name \_\_\_\_\_ M or F (circle)

Nickname \_\_\_\_\_ K4 \_\_\_\_\_ K5 \_\_\_\_\_  
*(Must be 4 or 5yrs. by Sept. 1)*

Birth Date \_\_\_\_\_ Age \_\_\_\_\_ Baptized:  Yes (Baptismal Date \_\_\_\_\_)  No

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Child is in the custodial care of: \_\_\_both parents \_\_\_Mother \_\_\_Father \_\_\_Other

Are you a FORMALLY REGISTERED member(s) of St. Mary Parish?  Yes  No

◆ **MARK if applicable:**

- ➔  I am a **Teacher Assistant** for the year: 1 child free
- ➔  I am a **Catechist** for the year: (choose one)  Take stipend - or -  All children free

\_\_\_\_\_ I am willing to teach preschool \_\_\_\_\_ I would volunteer to substitute teach.  
\_\_\_\_\_ I would be willing to be an aide in my child's classroom when needed.

Child is \_\_\_\_\_Right Handed \_\_\_\_\_ Left Handed

Briefly, please tell us about your child.

---

---

---

Describe any special needs, health problems or any allergies: \_\_\_\_\_

---

---

**Registration deadline is Tuesday, June 28.** Mail to or drop off at the Parish Office  
Attention: Jim Beuscher, St. Mary Lifelong Faith Formation, 9520 W. Forest Home  
Ave., Hales Corners, WI 53130.

I realize by enrolling my child/ren in this formal catechetical process that it is my responsibility to work with the catechists/leaders to witness my Catholic faith and to reinforce the teaching of the Church in our home. Then, together, we can become a believing and evangelizing community of faith.

\_\_\_\_\_ Parent(s) Signature(s)