



The Church of the Resurrection
 349 Morris Street † Clymer, PA 15728
 724-254-3041



**FAITH FORMATION
 REGISTRATION**

2018-2019

Please return this registration form by Monday, August 27, 2018. Thanks!



PARENT NAME: _____

ADDRESS: _____

PHONE: _____

E-MAIL: _____

Child/Children who will attend Faith Formation (GRADES K thru 8):

Please list the grade your child will be entering in the Fall for the School Year 2018-19.

Child Name: _____ **Grade:** _____

Child Name: _____ **Grade:** _____

Child Name: _____ **Grade:** _____

SITE WHERE YOUR CHILD/CHILDREN WILL ATTEND:



Clymer



Glen Campbell

In case of an emergency, please list someone we may contact, other than the information provided above:

EMERGENCY CONTACT: _____ **PHONE #:** _____

In case of closure due to weather, how do you want contacted? (CIRCLE ONE)

EMAIL

TEXT

PHONE

A donation of \$20.00 to help cover cost of materials is suggested for individuals and for families \$35.00. Please make check payable to: "Church of the Resurrection." Thank-you!

(This form may be placed in the Sunday collection basket, mailed to the parish office, or dropped off at the parish office between 9 and 4 PM!)