

FAITH FORMATION REGISTRATION FORM 2021-2022

SAINT JOHN THE EVANGELIST K-8



Office of Faith Formation

625 111th Avenue North • Naples, Florida 34108

Phone: 239-566.8740, ext. 3909

Website: www.sjecc.com

E-Mail: natalie@sjecc.com

1. Our Faith Formation Program is open to all children of our parish. If you are not a member of our parish, please complete a separate Family Parish Registration Form. Family Parish Registration Forms must be completed and submitted at the time you submit your Faith Formation Registration Form. Family Parish Registration Forms (New Parishioner Forms) can also be obtained at our Church website.
2. Children NEW to our program must submit a copy of their Baptism Certificate at the time of registration.
3. **COMPLETE ALL FORMS** and return to our Parish Office OR through the mail (above address) with check made payable to Saint John the Evangelist Catholic Church. Incomplete registration forms will not be processed.

Classes begin Sunday, September 12th and Wednesday, September 15, 2021.

STUDENT INFORMATION – Child #1

____ Returning Student and WAS enrolled 2020-2021 ____ New Student

First Name: _____ Last Name: _____ Shirt Size _____

Date of Birth: ____/____/____ Date of Baptism _____ Church of Baptism: _____

Grade (September 2021) _____ Known allergies or medical concerns _____

First Penance: Y/N (Circle One) First Communion Date: _____

Faith Formation Option : Wednesday (5:30-6:45PM) OR Sunday 9:30-10:45AM (Circle One)

STUDENT INFORMATION – Child #2

____ Returning Student and WAS enrolled 2020-2021 ____ New Student

First Name: _____ Last Name: _____ Shirt Size _____

Date of Birth: ____/____/____ Date of Baptism _____ Church of Baptism: _____

Grade (September 2021) _____ Known allergies or medical concerns _____

First Penance: Y/N (Circle One) First Communion Date: _____

Faith Formation Option : Wednesday (5:30-6:45PM) OR Sunday 9:30-10:45AM (Circle One)

STUDENT INFORMATION – Child #3

____ Returning Student and WAS enrolled 2020-2021 ____ New Student

First Name: _____ Last Name: _____ Shirt Size _____

Date of Birth: ____/____/____ Date of Baptism _____ Church of Baptism: _____

Grade (September 2021) _____ Known allergies or medical concerns _____

First Penance: Y/N (Circle One) First Communion Date: _____

Faith Formation Option : Wednesday (5:30-6:45PM) OR Sunday 9:30-10:45AM (Circle One)

PARENT/GUARDIAN INFORMATION

Father: Last name: _____ First Name: _____ Religion _____

Mother: Last name: _____ First Name: _____ Religion _____

Guardian: Last name: _____ First Name: _____ Relationship _____

Home Address: _____

Email Address: _____

Phone Number: _____