

Family Faith Formation Registration 2018-2019
St. Mark Catholic Church – 730 NE 6th Ave. – Boynton Beach – FL 33435
Office Phone (561) 734-9330 Fax (561) 735-3463

Today's Date: _____

FAMILY NAME (Parent's/Guardian's Last Name)		HOME PHONE NUMBER		E-MAIL ADDRESS	
STREET ADDRESS		CITY		ZIP CODE	
FATHER'S FULL NAME	MARITAL ST	RELIGION	MOTHER'S FULL NAME	MARITAL ST	RELIGION
FATHER'S OCCUPATION	WORK #	CELL #	MOTHER'S OCCUPATION	WORK #	CELL #

If divorced/ separated, please indicate: **CUSTODIAL PARENT: _____

PLEASE INCLUDE CHILD'S LAST NAME IF DIFFERENT FROM THE FAMILY OR GUARDIAN'S NAME

NEW STUDENTS PLEASE ATTACH COPY OF BAPTISM/ COMMUNION CERTIFICATE

	CHILD	CHILD	CHILD	CHILD	CHILD
NAME					
Grade Entering Fall 2018					
GENDER					
SCHOOL					
BIRTH DATE					
BAPTISM *** PLACE & DATE					
RECONCILIATION	YES OR NO	YES OR NO	YES OR NO	YES OR NO	YES OR NO
FIRST EUCHARIST PLACE & DATE					
LAST GRADE OF PRIOR REL. EDUCATION					

Fees:		Fees Due:	
Family Yearly Fee (1-2 Children)	\$100.00	Yearly Fee:	\$
Family Yearly Fee (3-4 Children)	\$150.00	Additional Fees:	\$
Family Yearly Fee (5 + Children)	\$175.00	Donation for families	
Additional Fees:		Who need assistance:	\$
2 nd year Confirmation Fee (Retreat & Gown)	\$75.00	Total:	\$
2 nd year Communion Fee	\$30.00		

OFFICE USE ONLY
Date Paid: _____
Cash / Check# _____
Balance Due: _____