



St Joseph Catholic Church – Tiffin Ohio
2023-2024 Faith Formation (CCD) Program Registration



- Please complete registration form and return form and check to parish office or drop in the collection.

- REGISTRATION FORMS DUE AUGUST 25, 2023

Cost
1 child - \$70.00
2 children - \$120.00
3 or more children - \$150.00
Sacrament Fee:
2 nd Grade - \$50.00
8 th Grade - \$130.00

Today's Date: _____

Name of First Student:(first middle last)_____

Grade:_____ Date of Birth:_____

Sacramental Information:

- Date of Baptism:_____ Name of Parish:_____

**** Copy of Baptismal Certificate (if not done at St Joseph) Required

- Date of First Communion:_____ Name of Parish:_____

Name of Second Student:(first middle last)_____

Grade:_____ Date of Birth:_____

Sacramental Information:

- Date of Baptism:_____ Name of Parish:_____

**** Copy of Baptismal Certificate (if not done at St Joseph) Required

- Date of First Communion:_____ Name of Parish:_____

**Additional space for students on the back of this form

Father's Name:_____

Mother's Name:_____ Maiden Name:_____

Legal Guardian's Name(s): (if applicable)_____

Fathers Address:_____

Mothers Address: (if different then above)_____

Fathers Cell:_____ Fathers Email:_____

Mothers Cell:_____ Mothers Email:_____

Member of St Joes Parish: Yes No If not, Parish Name: _____

Emergency Contact:_____

Telephone:_____ Relationship:_____

Name of Third Student:(first middle last) _____

Grade: _____ Date of Birth: _____

Sacramental Information:

- Date of Baptism: _____ Name of Parish: _____
**** Copy of Baptismal Certificate (if not done at St Joseph) Required

- Date of First Communion: _____ Name of Parish: _____

Name of Fourth Student:(first middle last) _____

Grade: _____ Date of Birth: _____

Sacramental Information:

- Date of Baptism: _____ Name of Parish: _____
**** Copy of Baptismal Certificate (if not done at St Joseph) Required

- Date of First Communion: _____ Name of Parish: _____

Name of Fifth Student:(first middle last) _____

Grade: _____ Date of Birth: _____

Sacramental Information:

- Date of Baptism: _____ Name of Parish: _____
**** Copy of Baptismal Certificate (if not done at St Joseph) Required

- Date of First Communion: _____ Name of Parish: _____