

The Basilica of St. Stanislaus, Bishop and Martyr
Parish Office: 40 Cyman Drive Chicopee, MA 01013 413-594-6669

2024-2025 REGISTRATION
Faith Formation Family Information Form

PLEASE PRINT

Pre-Kindergarten through Grade 8

PLEASE PRINT

1st Child's Name _____ Grade in Sept. 2024 ____
2nd Child's Name: _____ Grade in Sept. 2024 ____
3rd Child's Name: _____ Grade in Sept. 2024 ____
4th Child's Name: _____ Grade in Sept. 2024 ____

Father's Name: _____ Religion _____

Mother's Name (Include Maiden) _____ Religion _____

Parent's Marital Status: (Check One) Married ___ Separated ___ Divorced ___ Widowed ___

Child(ren) lives with: (Check All) Both Parents ___ Father ___ Mother ___

Other ___ (Name/Relationship) _____

Student's Address: _____ Phone _____
Street City State Zip

Parent E-Mail Address: _____

We are parishioners of St. Stanislaus Basilica _____

We are parishioners of _____ Church located in (City, State) _____

Additional Information: Complete this section if there is a Parent who is not living at the student's address listed above and should be notified of progress and/or special events.

Name: _____ Phone _____

Mailing Address _____

E-Mail Address _____ Cell Phone # _____

EMERGENCY CONTACT INFORMATION:

Mother's Cell Phone # _____ Father's Cell Phone # _____

Information of another person if neither mother nor father can be contacted:

Name _____ Cell Phone # _____

Relationship to the Child _____ Another Phone # _____

<p>For Office Use Only: Rec'd form: _____ Rec's fee: \$ _____ Date: _____ Check # _____ Initial _____</p>	<p>If you are a registered parishioner of the Basilica, the Registration Fee is \$50 for one child \$90 for two children \$120 for three or more children</p> <p>-----</p> <p>If you are not a registered parishioner of the Basilica, the Registration Fee is \$100 per child.</p> <p><i>Checks made payable to St. Stanislaus Basilica Return registrations to the Parish Office 40 Cyman Drive Chicopee 01013</i></p>
--	--

1st Child's Name _____ Date of Birth _____

Baptized at St. Stanislaus Basilica _____ Date _____

Baptized at _____ Church

located in (City/State/Country) _____ Date _____

Name of the Public or Charter School that the child will attend in Sept. 2024: _____

Please list any learning needs, health issues (including allergies, medications, etc.)

2nd Child's Name _____ Date of Birth _____

Baptized at St. Stanislaus Basilica _____ Date _____

Baptized at _____ Church

located in (City/State/Country) _____ Date _____

Name of the Public or Charter School that the child will attend in Sept. 2024: _____

Please list any learning needs, health issues (including allergies, medications, etc.)

3rd Child's Name _____ Date of Birth _____

Baptized at St. Stanislaus Basilica _____ Date _____

Baptized at _____ Church

located in (City/State/Country) _____ Date _____

Name of the Public or Charter School that the child will attend in Sept. 2024: _____

Please list any learning needs, health issues (including allergies, medications, etc.)

4th Child's Name _____ Date of Birth _____

Baptized at St. Stanislaus Basilica _____ Date _____

Baptized at _____ Church

located in (City/State/Country) _____ Date _____

Name of the Public or Charter School that the child will attend in Sept. 2024: _____

Please list any learning needs, health issues (including allergies, medications, etc.)

PARENT AND STUDENT LEARNING AND BEHAVIOR AGREEMENT

I have reviewed the classroom expectations with my child who understands what is expected of him/her and agrees to follow those expectations. I accept my parental spiritual responsibilities and will support the efforts of my child's catechist by ensuring his/her regular class attendance, taking an active interest in my child's progress and making weekly Saturday evening or Sunday Mass a regular part of our family's experience.

Mother's Signature _____

Father's Signature _____

Guardian's Signature _____

PROTECTION OF YOUTH

As part of our ongoing commitment to PROTECT CHILDREN from hurtful behaviors by others, St. Stanislaus Faith Formation Ministry teaches students about personal safety. This is part of the Diocese of Springfield's "Safe Environment" programming which includes background checks and training for adults who have contact with children, resources for parents, and skills trainings for teens in our parishes, schools and youth ministries.

Presented in the context of our Catholic faith, the goal of the Circle of Grace Program is to educate and empower children and young people to actively participate in a safe environment for themselves and others.

The Objectives of the Circle of Grace Program are:

Children/Young People will

- *understand they are created by God and live in the love of the Father, Son and Holy Spirit
- *be able to describe the Circle of Grace which God gives each of us.
- *be able to identify, discern and maintain appropriate physical, emotional, spiritual and sexual boundaries.
- *be able to identify all types of boundary violations.
- *demonstrate how to take action if any boundary is threatened or violated.

Please check one:

I give permission for my child(ren) to participate in the Circle of Grace Program. _____

I do not give permission for my child(ren) to participate in the Circle of Grace Program. _____

Mother's Signature _____ Date _____

Father's Signature _____ Date _____

Guardian's Signature _____ Date _____

SOCIAL MEDIA/PHOTO PERMISSION

During the 2024-25 year of classes, the St. Stanislaus Basilica Religious Education students may participate in news stories about religious education classes or special activities. This may include videotape, audio recording, web posting or still photograph productions that involve the use of students' names, likenesses or voices. Such productions may be used for educational or exhibition purposes by the St. Stanislaus Basilica Religious Education Program or the Diocese of Springfield and they may be copied, copyrighted, edited and distributed.

News media, including representatives of television, radio, newspapers and magazines, also may be permitted on school/parish property and may take still photos, sound records and/or videos or moving pictures that may include your child. These items may appear or be used in news or feature stories by print, television, website posting or radio media. As part of the Diocese of Springfield's Safe Environment policies, we do not publish children's addresses or information about children without the permission of the child's legal guardian.

Please COMPLETE THE FORM BELOW and CHECK ALL THAT APPLY.

I, the undersigned, DO CONSENT AND GRANT FULL PERMISSION for St. Stanislaus Basilica Religious Education Program and/or the Diocese of Springfield to use the:

- First Name(s) only**
- First and last name(s)**
- Photograph**
- Voice**
- Other likenesses (video, film)**

of my child(ren) for new releases, media and promotional activities. This request is valid for the current year of religious education classes 2024-2025

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Name (PRINT) _____

Parent/Guardian Signature _____ **Date** _____

OR

I, the undersigned DO NOT GRANT CONSENT AND FULL PERMISSION FOR THE ABOVE.

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Child's Name _____ **Grade** _____

Name (PRINT) _____

Parent/Guardian Signature _____ **Date** _____