

NEW REGISTRATIONS

Welcome to our Parish Faith Formation Program!

For our registration to be complete, we require the following information:

Baptism Certificate (if baptized at St Marguerite, please provide approximate date)

Did your child attend any faith formation classes in another parish?

Name and Address of Parish: _____

Grade(s) Attended: _____

Years Attended: _____

Proof of attendance from above parish is needed to show the years attended and successful completion

Communion Certificate should be provided if applicable

Please also complete:

Parish Registration Form

Faith Formation Registration Form

Payment enclosed (See fees on Faith Formation Registration Form).

Checks are to be made payable to "St Marguerite Bourgeoys Parish".

ST. MARGUERITE BOURGEOYS PARISH

138 Candlewood Lake Road, Brookfield, CT 06804
203.775.5117 | www.stmarguerite.org

Registration Date: _____
Envelope #: _____

Family Information:

Last Name: _____ First Name(s): _____
Mailing Name (ie. Mr. and Mrs. John Smith): _____
Address: _____
City: _____ State: _____ Zipcode: _____
Home Phone # (with area code): _____
Emergency Phone #: _____
Family Email: _____

Adult Member Information:

Parish Status (active/inactive): _____
Role (Head of Household, husband, wife): _____
First Name: _____
Last Name: _____
Gender: M/F (Maiden Name): _____
Date of Birth (mm/dd/yy): _____
Email: _____
Sacrament Info: Baptized? Y/N Catholic? Y/N
Penance? Y/N First Eucharist? Y/N Confirmed? Y/N
Work/Cell #: _____
Occupation & Employer: _____

Parish Status (active/inactive): _____
Role (Head of Household, husband, wife): _____
First Name: _____
Last Name: _____
Gender: M/F (Maiden Name): _____
Date of Birth (mm/dd/yy): _____
Email: _____
Sacrament Info: Baptized? Y/N Catholic? Y/N
Penance? Y/N First Eucharist? Y/N Confirmed? Y/N
Work/Cell #: _____
Occupation & Employer: _____

Dependent Children Information:

First Name	Last Name	Date of Birth	Gender
_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N

First Name	Last Name	Date of Birth	Gender
_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N

First Name	Last Name	Date of Birth	Gender
_____	_____	_____	M/F
Baptized? Y/N Catholic? Y/N	Penance? Y/N?	First Eucharist? Y/N?	Confirmed? Y/N

St. Marguerite Bourgeoys Church - Faith Formation Registration

138 Candlewood Lake Rd. , Brookfield, CT 06804

Term: 2025 - 2026

FAMILY INFORMATION

Family Last Name: _____ Date: _____

Father: _____ Father's Email: _____

Mother: _____ Mother's Email: _____

Mother's Maiden: _____ Emergency Contact: _____

Home Phone: _____ Emergency Phone: _____

Home Address: _____

City, St, Postal: _____

Father's Cell / Work: _____ Father Religion: _____

Mother's Cell / Work: _____ Mother Religion: _____

STUDENT INFORMATION

Student Name: _____ Catholic? Yes / No

Gender: Male Female

Sacrament Details Check & Date All Below

Birth Date: _____

Baptism: _____

Grade: _____

Eucharist: _____

Session: _____

Reconciliation: _____

Class: _____

Confirmation: _____

Special Needs (Medical, Learning Disabilities, Physical Disabilities etc):

STUDENT INFORMATION

Student Name: _____ Catholic? Yes / No

Gender: Male Female

Sacrament Details Check & Date All Below

Birth Date: _____

Baptism: _____

Grade: _____

Eucharist: _____

Session: _____

Reconciliation: _____

Class: _____

Confirmation: _____

Special Needs (Medical, Learning Disabilities, Physical Disabilities etc):

NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

Tuition DUE: \$ _____ Tuition PAID: \$ _____ Signature: _____

Faith Formation Registration Fees

1 Student: \$175; 2 Students: \$275

3 Students: \$375.

Sacrament Fees (if applicable) are billed at a later date.