

BLAZE REGISTRATION FORM

Please print clearly

Household Contact Person: _____

Address: _____

Home Phone #: _____ Alternate #: _____

Email Address: _____

Write in the name of each member of your household participating in the 2008 - 2009 BLAZE Christian Formation program. Be sure to enter the appropriate information in each column. If any member has a different last name, please include their last name on the form.

	Name	Age	Grade Level	Male Female	Pathway Y or N	Virtus Y or N	Choir or Plays Instrument
1							
2							
3							
4							
5							
6							
7							

Check if the nursery is needed during Blaze for a 3 year old or younger sibling

List any children with special needs or allergies: (mention any special learning needs)

List any child(ren) on this form who have not been Baptized:

List any child(ren) older than 2nd grade who have not received Eucharist or Reconciliation:

MIDDLE AND HIGH SCHOOL PARENTS: we need you to help with many things during the year - check any area(s)
(DIOCESAN REQUIREMENT: anyone working with minors must undergo background screening and attend VIRTUS class.)

- Substitute Catechist
- Retreat Chaperone
- Snacks / meals
- Set up
- Chaperone community service class projects
- Phoning and assist with special events
- Other (write response)

BLAZE FEES:

of children _____ X \$40 = _____
 Adult Fee \$40
TOTAL BLAZE _____

ADDITIONAL BOOK FEES:

2nd Reconciliation Book (\$15) _____
 2nd Eucharist Book (\$15) _____
 10th Books (\$60) _____
 11th Books (\$60) _____
 11th Retreat (\$100) _____
TOTAL BOOK _____

TOTAL BLAZE FEE: _____ + **TOTAL BOOK FEE:** _____ = **FINAL TOTAL:** _____

Check #: _____ Cash Receipt #: _____ I will pay thru E-Giving _____