

<p>Office Use Only</p> <p>Day/Time: _____</p> <p><input type="radio"/> Enrolled</p> <p><input type="radio"/> Emergency Contact</p> <p><input type="radio"/> Medical Information</p> <p><input type="radio"/> Funds</p> <p><input type="radio"/> Baptism Certificate</p>
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**WELCOME TO ST. PIUS X**  
**2008-2009 CHRISTIAN FORMATION**  
**PRE-SCHOOL – 6<sup>TH</sup> GRADE REGISTRATION FORM**  
 Registration Form is online: [www.stpiusxblgs.org](http://www.stpiusxblgs.org).

Enrollment Information

Registration form and fees are due on or before **August 17, 2008**

Fees: 1 child = \$45.00, 2 = \$75.00, 3 or more = \$90.00

*(No child will be refused enrollment based on inability to pay the fee.)*

**New students and Sacramental students: Please attach a copy of the Baptismal certificate.**

1. Are you REGISTERED members of St. Pius X? (\_\_\_)Yes (\_\_\_)No
2. Family Last Name: \_\_\_\_\_  
 Father's Name: \_\_\_\_\_  
 Mother's Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone: Home: \_\_\_\_\_ Father's Work \_\_\_\_\_  
 Mother's Cell \_\_\_\_\_ Father's Cell \_\_\_\_\_  
 Email: \_\_\_\_\_

(\_\_\_) **Please Check if this is a new address**

- *Is there an additional address you would like mailings to be sent to (ie. Grandparents, non-custodial parents):*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Other: \_\_\_\_\_

3. Emergency contact if parents/guardians cannot be reached. Please notify your emergency contact that they are listed in the event that you cannot be reached.

Name: \_\_\_\_\_ Phone:(home) \_\_\_\_\_

(work) \_\_\_\_\_ (cell) \_\_\_\_\_

Relationship: \_\_\_\_\_

**4. Student Information**

Full Name of child:	Gender		Birthday	Grade 2008/09	Baptized Catholic		First Eucharist		Confirmation	
	M	F			Y	N	Y	N	Y	N

*If your child was baptized in another faith, please contact Karyn Haider 656-2522.*

5. Additional information we should know about your child(ren):  
(Examples: allergies, medications, behavioral problems, reading disabilities, etc.)

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6. My child(ren) attend(s): \_\_\_\_\_ school.

**7. Parents/Guardians, share your gifts, we need your help for our Faith Formation Process to be a success!! Must be Virtus trained.**

8. I will share my faith by teaching Godly Play ( ) Yes Grade ( )
9. I will share my faith by teaching in our  
Christian Formation Process ( ) Yes Grade:( )  
Day/Time: \_\_\_\_\_
10. I will help as a co-catechist ( ) Yes Grade:( )  
Day/Time: \_\_\_\_\_
11. I will help as a substitute ( ) Yes Grade:( )  
Day/Time: \_\_\_\_\_
12. I will help with retreats, special events and class parties. ( ) Yes ( ) No
13. I will help with Vacation Bible School (summer-2009)( ) Yes ( ) No  
Coordinate \_\_\_\_\_ Public Relations \_\_\_\_\_  
Set-up (Sunday) \_\_\_\_\_ Clean-up (Friday)\_ \_\_\_\_\_ Snacks \_\_\_\_\_ Crafts \_\_\_\_\_  
Computer \_\_\_\_\_ Music \_\_\_\_\_ Kitchen \_\_\_\_\_ Catechists \_\_\_\_\_  
General Helpers \_\_\_\_\_ Registration \_\_\_\_\_ Props \_\_\_\_\_

Nursery \_\_\_\_ Media Tech (video, audio, photos) \_\_\_\_  
 Artist (backdrops) \_\_\_\_ Other. \_\_\_\_

14. I attended Virtus training \_\_\_\_ Where \_\_\_\_\_ Date: \_\_\_\_\_

15. I need to attend Virtus training \_\_\_\_\_

***Virtus training, background check, and code of conduct are not optional, it is mandatory for all volunteers and paid staff who work with children.***

**Preschool/Kindergarten – Godly Play**

Full Name of child	Sunday 8:50-10:10	Sunday 10:50-12:10

**1<sup>st</sup> and 2<sup>nd</sup> Year Sacramental Prep**

Full Name of child	Monday 4:15-5:30	Tuesday 4:15-5:30	Wednesday 4:15-5:30	Wednesday 6:45-8:00

**Grades 3&4**

Full Name of child	Monday 4:15-5:30	Tues. 4:15-5:30	Wed. 4:15-5:30 Catholic Identity	Wednesday 6:45-8:00

**Grades 5&6**

Full Name of child	Wednesday 4:15-5:30 Catholic Identity	Wednesday 6:45-8:00 pm Elementary Youth Group (EYG)

**You will be notified ONLY if a session(s) is eliminated or if your student is placed in your second choice.**

The only reason we would eliminate a session(s) is if we don't have enough catechists or students. Check the bulletin for important information and the website for our calendar.

16. To complete registration:

- a. Make checks payable to **St. Pius X Church**.
- b. Attach your check (**new or Sacramental students attach a copy of the Baptism certificate**) to the registration form.
- c. Return the form, Baptismal certificate, and check to St. Pius Parish Center or mail it directly to the church office at the following address:

**St. Pius X**  
**Attn: Christian Formation**  
**717 18<sup>th</sup> St. W**  
**Billings, MT 59102**

17. Paid: \$\_\_\_\_\_ Waive Fee: (Please check one of the following):  
Catechist/Co-Catechist \_\_\_\_\_  
Scholarship \_\_\_\_\_

**Photo Permission:** Occasionally photos are taken of children during class time or activities and we would like to post the photos on the bulletin board and/or website. No names will be attached to the photos. Please check "Yes" or "No". (You may change your decision at any time by notifying the office.)

Yes\_\_\_\_\_ No\_\_\_\_\_

Parent/Guardian Signature:\_\_\_\_\_ Date: \_\_\_\_\_

Any questions, please call Barbara Burleson, 656-2522 X104 or [barbara@stpiusxblgs.org](mailto:barbara@stpiusxblgs.org)

Revised 1/24/2008