

St. Patrick Parish Faith Formation Program

Faith Formation will have multiple aspects this year and is beginning on September 23rd

1. We will continue to have Catechesis of the Good Shepherd, but are expanding the ages to which this is available. Level I will be for 4-6 year olds and Level II will be for 7-9 year olds. This is a Montessori-based catechesis that teaches young children the essentials of the faith through hands-on materials, and is a great opportunity for our young children to develop their relationship with God. It will meet weekly during the school year after the 9:30 mass. This program includes preparation for the sacraments of Confession, Confirmation and First Holy Communion.
2. We will also have a new program this year called A Family of Faith. This program is designed so that parents can learn from Father Kerper (or occasionally someone designated by him) at monthly meetings and then teach their children at home with provided materials between meetings.

The monthly meetings (also after 9:30 mass) will run as follows:

- Adults will meet with Father Kerper
- Children aged 4-9 will be in Catechesis of the Good Shepherd if they are registered for it
- Children in grades 5-8 will have a Confirmation class
- High School students will have a catechism class on a topic such as Theology of the body

If there are any questions please email faithformation@stpatricksnashua.org

Please Print Clearly:

Father's Full Name: _____ Mother's Full Name: _____
 Cell Phone #: _____ Cell Phone #: _____
 Email address: _____ Email address: _____
 Name of Legal Guardian (if applicable): _____
 Address where the child(ren) live: _____
 Home Phone: _____ Parish Envelope #: _____ Check #: _____ Amount enclosed: \$ _____

Child's Name	Gender	Birth date (including year) & Age	School & Grade for 2018-2019	Sacraments [^] <u>Received</u> (circle)	Baptismal on file (Office Use)
				B R FC C	
				B R FC C	
				B R FC C	
				B R FC C	

Emergency Contact Information

If there is an emergence, we will notify parents immediately. If a parent cannot be reached, then this person will contact:
 Name: _____ Relationship to Child(ren): _____
 Phone #: _____ (circle one – cell, work, home)

Special circumstances regarding my child(ren) – social, medical or academic. *Please also talk with the Directors with details.*

Child's Name: _____ Note: _____
 Child's Name: _____ Note: _____

Parent or Guardian Signature: _____ Date: _____

I would like to volunteer for special events or other needs. Please contact me: YES NO