

### FAMILY INFORMATION

Today's Date

Family's Last Name

Family ID / Envelope #

Street Address

City, State, Zip Code

Father / Legal Guardian

Mother / Legal Guardian

First Name:

E-Mail:

Cell Phone:

May we send you a text message for important notifications  
(i.e., class cancelled due to inclement weather)?

Yes  
 No

May we send you a text message for important notifications  
(i.e., class cancelled due to inclement weather)?

Yes  
 No

Very Rev. Robert Webster, *Pastor*  
Rev. Augusto Cadavid, *Associate Pastor*  
Rev. Roy Eco, *Associate Pastor*  
Chris Stalnaker, *Director of Faith Formation*

720 12th Street  
Clermont, FL 34711

Phone | (352) 394-3562  
Fax | (352) 241-0062  
[www.mybscc.org](http://www.mybscc.org)



## STUDENT INFORMATION

Student's First Name:

Student's Last Name:

Age:

Current Grade:

Date of Birth:

Male  Female

Please select your preferred class time:

**Wednesdays (Grades K-12)**

4:15pm - 5:45pm

6:15pm - 7:45pm

**Family Faith Formation  
(Homeschool, meets monthly)**

Saturday, 9:30am - 11:30am

Sunday, 9:30am - 11:30am  
*(wait list only)*

Sacrament Information

Will this student be preparing to receive a sacrament this year?  Yes  No

If yes, for which sacrament(s) will this student be preparing?

Reconciliation/First Communion   
Confirmation

Has this student received the sacrament of baptism?  Yes  No

To participate in a Sacramental Program, your child must have attended Faith Formation last year. If your child is preparing for a sacrament this year, please choose a class time on Wednesday and complete a Sacramental Preparation Registration Form.

Please note any allergies and/or important medical information:

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## EMERGENCY CONTACT INFORMATION

Other than yourself, who else is authorized to pick up your child?

First Name:

Last Name:

Phone Number:

First Name:

Last Name:

Phone Number:

## TUITION

1 Child	\$60.00
2 Children	\$120.00
3 or more Children	\$150.00
Confirmation Retreat	\$20.00

## IMPORTANT

Parent(s)/Legal Guardian(s): Your decision to enroll in the Blessed Sacrament Catholic Church Faith Formation Program provides your consent, authorization and permission for the Diocese of Orlando and Blessed Sacrament Catholic Church of Clermont, Florida, its agents, employees or duly authorized representative to take photographs, motion pictures, video or audio tapes of enrolled students. Enrollment also provides your consent for the publication, circulation and dissemination of said photographs, motion pictures, video or audio tapes or any duplication or facsimiles thereof for purposes it may deem proper, within Diocesan guidelines. In enrolling in this program, you also are relinquishing and giving to the Diocese of Orlando all right, title and interest in the finished pictures, negatives, reproductions or copies, and further waiving any and all rights to approve the use of such photographs, motion pictures, video or audio tapes and so release any and all claims of any nature whatsoever arisen for their use.

*I agree:* \_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

*Office Use*

Date Received: <input style="width: 90%; height: 20px;" type="text"/>	Total Tuition Due: <input style="width: 90%; height: 20px;" type="text"/>
Check Num/Cash?: <input style="width: 90%; height: 20px;" type="text"/>	Amount Paid: <input style="width: 90%; height: 20px;" type="text"/>
Notes / PP info: <input style="width: 95%; height: 50px;" type="text"/>	Balance Due: <input style="width: 90%; height: 20px;" type="text"/>