Our Lady of the Assumption Catholic Church

Faith Formation Registration faithformation@olaparish.net

2026-27

FAMILY INFORMATION

Parent(s)/Guardian	Phone Number	E-mail

PRIMARY MAILING ADDRESS

Street Address City, Zip Code	

STUDENT INFORMATION

Child's Name	Birthdate	Current Grade 2026-27	Baptism Received	First Communion Received	If responded no, year of First Communion Preparation	Year of Confirmation Prep
			○ Yes ○ No	○ Yes ○ No	○ First ○ Second	○ First ○ Second
			○ Yes ○ No	○ Yes ○ No	○ First ○ Second	○ First ○ Second
			○ Yes ○ No	○ Yes ○ No	○ First ○ Second	○ First ○ Second
			○ Yes ○ No	○ Yes ○ No	○ First ○ Second	○ First ○ Second

The Catholic Church teaches that parents are the primary teachers of the faith. In this spirit, I understand my role and will do my best to regularly attend Mass as a family. I know that regular attendance at Faith Formation sessions on Sundays supports my child's faith development. Further, I commit to being an active participant in the Our Lady of the Assumption faith community.

Signature_____Date_____

For Office Use Only: