



Divine Mercy Catholic Church

2231 Club Center Drive, Sacramento CA 95835
CFF Ofc: (916) 265-0299 Parish Ofc: (916) 256-3134 Fax: (916) 265-1999
DRE Email: luzmanrique174@gmail.com Website: www.divinemercynatomas.com

CFF General Registration Form

CFF Program Donation (registration, books & materials)

Registered/Active Parishioner

Inactive/Non-Registered Parishioner

1 child..... \$ 85.00
2 children..... \$ 150.00
3 children..... \$ 200.00

1 child..... \$ 150.00
2 children..... \$ 250.00
3 children..... \$ 300.00

4 or more children..... + \$50.00

***Sacramental Fees:** First Eucharist \$ 50.00
Confirmation \$ 110.00

Make checks payable to Divine Mercy Parish

PLEASE PRINT CLEARLY

For Office Use Only:	
Date:	
Paid: \$	Check #
Balance: \$	<input type="checkbox"/> Cash
Received By:	Receipt #

STUDENT INFORMATION

Child's Baptismal Name:
(First Name, Middle, Last Name)

Date of Birth (mm/dd/yyyy): _____ Gender: **M** / **F** School Grade by Fall: _____

CFF Grade & Session:	<input type="checkbox"/> *Sundays 9:00am -10:30am	<input type="checkbox"/> Sundays 10:30am - 12:15pm	<input type="checkbox"/> Mondays 6:00pm - 7:30pm	CFF Grade Level:
	<i>If your child was baptized in a church other than Divine Mercy Parish, a copy of the baptism certificate will be required.</i>			

Baptismal Certificate BC on File & Verified by: _____

Sacraments needed this year: Baptism Reconciliation Eucharist Confirmation

Allergies: (Drug or Food) _____ Medicines currently taking: _____

Frequency & Dosage of Medication: _____

Health/ Behavioral or Learning Concerns: (Please indicate those that are important for the catechists to know such as: seizures, asthma, visual or hearing disabilities, ADHD, difficulty in reading or writing etc.) _____

Additional Remarks: _____

MEDICAL RELEASE AND CONSENT TO TREAT

This release is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstance in my absence. This authority is granted only after a reasonable effort has been made to reach me or the indicated emergency contact person.

Parent's Signature: _____

Date: _____

PHOTO RELEASE:	Divine Mercy Parish has my permission to publish my child's (children's) photograph in or on the parish's:		
	<input type="checkbox"/> Church Bulletin	<input type="checkbox"/> Website/Facebook Pages	<input type="checkbox"/> Other Parish Publication

Guideline for Session Placement

CFF Levels Per Session	<p>SUNDAY CFF SESSION Starts on September 23, 2018 <i>* 9:00am - 10:30am for RCIA Adapted; RCIA -2; Confirmation 2</i> <i>10:45am - 12:15pm for Grades 1 through Confirmation 2</i></p> <p>MONDAY CFF SESSION Starts on September 24, 2018 <i>6:00pm - 7:30pm for Grades 1 through Confirmation 2</i></p>
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Eucharist 1 Class	For grades 1 & 2 who are in their 1st year of preparation for First Holy Communion
Eucharist 2 Class	For grades 2 & 3 who are in their 2nd year of preparation for First Holy Communion
Grade/Level 3	
Grade/Level 4	
Grade/Level 5	
Grade/Level 6	
Confirmation 1	For regular grades 7, 8 & 9 who are in their 1st year of preparation for Confirmation
Confirmation 2	For regular grades 8, 9 & 10 who are in their 2nd year of preparation for Confirmation
*RCIA Adapted	RCIA Adapted is a 2-year process. At least one adult, which could be a parent, grandparent, or a sponsor, must attend all the sessions with the child/youth. Sessions are on Sundays, 9:00am - 10:30am. *RCIA Adapted is for children in the 3rd - 6th grade who want to be Baptized in the Catholic Church and who desire to make their First Holy Communion/children who are in the 7th - 12th grade, who desire to be Baptized, make their First Holy Communion and be Confirmed in the Catholic Church.
*RCIA 2	For grades 10th through 12th who have completed their RCIA 1 in the previous year

NOTE:

For Pre-K and Kindergarten children (4 to 6 yrs. old), please join the Children's Liturgy program or the Catechesis of the Good Shepherd (CGS). For more information on CGS contact Mary Travis at 916-213-9692. For more information on Children's Liturgy contact the Parish Office.

***RCIA Adapted** -The 2-year confirmation process does not start until the child is in the 7th grade or above.

If your child was baptized in a church other than Divine Mercy Parish, a copy of the baptism certificate will be required.

FAMILY INFORMATION

Father's Last Name:	Mother's Last Name:
First Name:	First Name:
Religion:	Religion:
Home Phone:	Home Phone:
Cellphone: Text? Y or N	Cellphone: Text? Y or N
Alternate Phone: (e.g., work/guardian)	Alternate Phone: (e.g., work/guardian)
Family Email: <i>(please provide email that is checked regularly)</i> :	
Mailing Address:	
With whom does the child reside? <input type="checkbox"/> both parents <input type="checkbox"/> mother <input type="checkbox"/> father <input type="checkbox"/> shared custody	
Primary phone we should use: <input type="checkbox"/> home <input type="checkbox"/> father's cell <input type="checkbox"/> mother's cell	
IN CASE OF EMERGENCY: during the hours your child is in class, whom should we contact?	
Emergency Contact <i>(other than parents)</i> :	
Emergency Contact Person's Cell Phone:	
Relationship to Student:	

CFF Family Commitment Statement

The Catholic Faith Formation in Divine Mercy Catholic Church program does not replace the catechesis that the children should be receiving at home. It aims, rather, to work in partnership with the families in order to learn, grow & live their faith. To fully appreciate and enhance our faith journey, we acknowledge the importance of actively participating in the Sacramental life of church community and contributing our time, talent and treasure for the growth of our Church.

With my initials and signature, I/we indicate my/our understanding and commitment to our Parish Faith Formation process:

Initial Here:

	<i>I/We will strive to fulfill the promise I made at my child's Baptism to be the primary person who guides my child's faith development.</i>
	<i>I/We will strive to <u>the practice of faith for myself and my children by participating at Mass every weekend and Holy days of obligation.</u></i>
	<i>I/We will financially contribute to Divine Mercy Parish on a regular basis a gift that reflects my sincere and honest ability to help support our parish.</i>
	<i>I/We will ensure my child's consistent attendance at weekly sessions (no more than 3 excused absences) and <u>will honor and fulfill my financial support</u> of faith formation efforts for my(our) child(children).</i>
	<i>I/We will participate and be involved with the activities of the program to help sustain the faith formation of our young people.</i>
	<i>I/We will attend any adult (parent) faith formation that is required of us as the primary catechist of my(our) child(children).</i>

TIME ~ TALENT ~ TREASURE

Volunteer Opportunities

We request at least five (5) hours of volunteer service from the parents/guardians of our children enrolled in faith formation. Please select **at least one** area in which you can commit to serve. Sign in with the Director of Religious Education or CFF representative each time you come for your volunteer service.

Name of Volunteer: _____

Email: _____

Mobile: _____

*** A background check and fingerprinting (live scan) is required by the Diocese and the Parish for all volunteers working with children. Please submit this form to the CFF office and we will contact you.**

1	I am interested in serving as a catechist *. (Day/Time/Grade):
2	I am interested in serving as an assistant *. (Day/Time/Grade):
3	I can help with some CFF office/computer or clerical work.
4	I will help by donating needed hospitality items/classroom supplies throughout the year.
5	I can provide musical accompaniment at group prayer services, afternoons or evenings.
6	I can help set up the portable rooms during special CFF events.
7	I can help clean up the parish hall during special CFF events.
8	I can chaperone/drive for our Confirmation candidates in their outside activities like the retreat or Confirmation conference*.
9	I can help with sewing and other crafts needed for materials for our Christmas pageants, All Saints' Day or other events.
10	I can help tidy up and arrange the Missals in the pews between masses on weekday and/or weekends.
11	I would like to help with: <i>(please specify)</i>

We rely on the graciousness of dedicated volunteers to serve in catechetical ministry. Please consider how you might help to serve in faith formation. **For those unable to give the minimum 5 hours or fraction thereof, a donation to CFF Ministry of \$10/hr. is suggested.**

Printed Name of Parent/Guardian: _____

Parent/Guardian Signature: _____ Date: _____