THE ROMAN CATHOLIC PARISH OF

Saint Michael

BEACON FALLS, CT 06403
203-729-2504

FAITH FORMATION REGISTRATION (GRADES 1-7) 2026-27

Registration Fee: Parishioner: $35.00 Non-Parishioner: $55.00
Maximum per Parishioner family: $75.00 Maximum per Non-Parishioner Family: $160.00
Maximum Fees Do Not Include Confirmation Registration.

Deadline for registration is September 13, 2026

(Students in grades 8 and 9, please use Confirmation Registration.)

Child's Name: _____ Grade: _____

Parent/Guardian Name: _____

Address: _____ Email: _____
Primary Phone #: _____ Secondary Phone #:_____

We are currently registered parishioners of St. Michael Church, Beacon Falls CT: ___Yes ___No
If not currently a registered parishioner, which parish are you a member of?: _____

Has your child been baptized: _____Yes _____No
Place of Baptism:
☐ St. Michael Church, Beacon Falls ☐ Other: _____

Parents of 3rd Grade Students: PLEASE NOTE that if your child was NOT baptized at St. Michael Church, Beacon Falls, CT, a copy of his/her Baptism Certificate must be attached to this form in order to register. All students registering for 3rd grade Faith Formation MUST have completed the 1st and 2nd grade curriculum.

Please provide an alternate contact in case of an emergency and we are unable to contact you:
Name: _____ Phone #: _____

I am aware that my child(ren) will view and participate in virtual online learning CCD classes facilitated by Saint Michael's Church, Beacon Falls, CT for the 2026/27 year if needed.

Parent's/Guardian Signature: _____ Date: _____

Please note any health issues you feel we should know about on the back of this form.

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FOR OFFICE USE ONLY:

Date Received: _____ Total Payment: _____
Cash: _____ Check# _____