

## EVANGELIZATION and FAITH FORMATION REGISTRATION

**(PART A)**

*FORMING DISCIPLES: Through Witness, Worship, Catechesis, and Service*  
 Our Lady of the Fields Church, 1070 Cecil Ave., S, Millersville, MD 21108  
**Office: 410-923-6953    [faithformation@olfparish.com](mailto:faithformation@olfparish.com)    Fax: 410-923-6992**

Date Rcvd _____
Amt. Rcvd _____
Payment _____ Dsc _____
Approved _____

Registration for year: \_\_\_\_\_      **Continuing Registration**       **New Registration**

Family Name	Phone Number:
Mailing Address	E-Mail Address <i>(For correspondence &amp; emergency purposes only)</i>
City, Zip	

	Name	Religion	Occupation	Cell Phone	E-mail Address <small>(If different from above)</small>
Father					
Mother					

**Child/Children Live with:** \_\_\_ Both Parents \_\_\_ Mother \_\_\_ Father \_\_\_ Step Parent \_\_\_ Guardian \_\_\_ Grandparent \_\_\_ Other  
**Please list any special family circumstances of which we should be aware:** \_\_\_\_\_  
 *I would like to discuss this with Dr. Thomas Little ([tlittle@olfparish.com](mailto:tlittle@olfparish.com)) or Andrea McGill Reddinger ([andrea@olfparish.com](mailto:andrea@olfparish.com)).*

First	Child's Name Last (if different)	Date of Birth	Gender	Sacraments Already Received in Catholic Church		
				Baptism <small>(Church/year)</small>	Reconciliation <small>(Church/year)</small>	Eucharist <small>(Church/year)</small>
1.						
Grade in September:	School Attending:			Class Session Selection: 1st Choice: _____ 2nd Choice: _____		
2.						
Grade in September:	School Attending:			Class Session Selection: 1st Choice: _____ 2nd Choice: _____		
3.						
Grade in September:	School Attending:			Class Session Selection: 1st Choice: _____ 2nd Choice: _____		
4.						
Grade in September:	School Attending:			Class Session Selection: 1st Choice: _____ 2nd Choice: _____		

- Select from the following Class Sessions at the Parish Center:**
- 3 year olds, 4 year olds, Kindergarten, 1<sup>st</sup> & 2<sup>nd</sup> (limited to children with siblings in PK or K) SUNDAYS 9:30AM & 11:00AM
  - Grades K-8: SUNDAYS 8:00AM, 12:30PM, 4:45PM (NO K), TUESDAY 4:30PM, WEDNESDAY 4:30PM
  - Confirmation (Grade 9 & up): SUNDAYS 8:00AM, 12:30PM, 4:30PM, TUESDAY 4:30PM, WEDNESDAYS 4:30PM & 6:00PM

Please list any allergies and actions to be taken in case of exposure:

Please list any medical information concerning dietary restrictions or medication, etc.:

Does your child(ren) have an IEP or 504 plan? \_\_\_\_ YES \_\_\_\_ NO

If YES, please provide a copy of the Accommodations page, supplementary aides/ services, and Behavioral Intervention Plan (BIP) as applicable to [andrea@olfparish.com](mailto:andrea@olfparish.com). Thank you!

**EMERGENCY CONTACT INFORMATION**

In case of an emergency during faith formation program, please provide us with additional contact information. (All information is kept strictly confidential and shared only with your child's catechist).

I, the undersigned parent or legal guardian of: \_\_\_\_\_

(a minor), do hereby authorize adult volunteers of Our Lady of the Fields Faith Formation or adult staff members of Our Lady of the Fields to obtain medical care from a licensed physician, hospital, or medical clinic for my child in the event that I cannot be reached. I agree to RELEASE AND HOLD HARMLESS AND INDEMNIFY Our Lady of the Fields Church, any of its ministries or leaders, the Division of Evangelization and Catechesis, the Roman Catholic Bishop of Baltimore and his successors, A Corporate Sole, and all their agents, servants and employees from any liability, claims and causes of action arising out of my child's participation in the program.

(Check one of the following)

\_\_\_\_ I am covered by hospitalization and medical insurance under policy: # \_\_\_\_\_ issued by \_\_\_\_\_

\_\_\_\_ I do not have medical coverage and assume responsibility for the cost of hospitalization and medical care for my child(ren).

Emergency Contact name/number (other than parent): \_\_\_\_\_

**Sacramental Preparation:** *To receive any sacrament, your child must be a registered parishioner, regularly attend Mass, and participate in Faith Formation classes or Catholic School for at least one year prior to and during the period of preparation.*

**IFF: Initial Faith Formation:** Formation sessions for baptized children (2<sup>nd</sup> grade or older) enrolling for the first year of formal faith formation in preparation for celebration of the sacraments during a second (consecutive) year.

I would like my child(ren) to participate in Sacramental Preparation this year. Please complete/ indicate all that apply:

Child's Name	Baptism	Reconciliation	Eucharist	Confirmation

*Parents or Legal Guardians must attend all Sacramental meetings as required by the Archdiocese of Baltimore.*

I would like my child to participate in RCIA for Children. (This is a program for children ages 7-17 seeking initiation in the Catholic faith.)

**(PART B) Please Print Family Name:** \_\_\_\_\_

**Registration deadline is July 1<sup>st</sup>.** Any registrations received after July 1st will not be guaranteed 1st or 2nd choice.

**Please register on time. We can adjust class assignments in the case of a conflict.**

If payment prevents you from registering on time, send your form in and request that we develop a payment plan with you. No child will be denied Faith Formation due to lack of funds. If you are a registered member of Our Lady of the Fields and need financial assistance with tuition, please contact Dr. Thomas Little ([tlittle@olfparish.com](mailto:tlittle@olfparish.com)) or Andrea McGill Reddinger ([andrea@olfparish.com](mailto:andrea@olfparish.com)). If your uncertainty about your schedule is preventing you from completing the form, we advise you to send the registration with your 1st and 2nd choices. We will make adjustments as necessary.

<u>Tuition:</u> PK-Grade 8	1 child (Gr.PK-8)	\$140
	2 children (Gr.PK-8)	\$180
	3 or more children (Gr.PK-8)	\$200

**Confirmation (separate fee from Faith Formation) \$220**

Are you registered member of OLF? Yes / No  
(If not, please fill out a parish registration form from website and submit with this form.)

Check one:

-Cash Enclosed \_\_\_\_\_ -Credit Card (use form attached) \_\_\_\_\_

-Check Enclosed \_\_\_\_\_

**(PART C)**

## **Parents: you are the Christian Witnesses for your children.**

**The foundation of your witness to your faith is participation at weekly Mass with your family.**

As a parent, and your family's primary teacher, you have the greatest impact on your child's growth in the Catholic Faith. While the parish community supports you in this role, nothing replaces your witness as you live out your Christian Discipleship. Parents have been ordained by God to evangelize and guide their children. How you demonstrate this priority of your relationship with Christ will speak louder than anything that takes place in the classroom. Faith formation classes are a supplement, not a replacement, to the lifelong discipleship of your child.

In addition, we all need ways that we can give of our time, talent and treasure, and grow in our faith through ongoing catechesis. A list of ways to do this can be found on the next page. **We ask that you choose one (or several!) of the options before registering your child for formation classes.**

**Think of it as your commitment to your child and the ongoing fulfillment of your promises made at the time of their baptism.**

*As an integral part of our faith formation curriculum, we will be teaching Catechesis for Family Life. This age appropriate program about Christian living, chastity, character formation, and safe environment training promotes communication between you and your child.*

*You may contact the office to preview the Archdiocesan approved materials.*

**Please return this signed four-page registration form  
with payment to:**

**Our Lady of the Fields Church**

**Attn: Evangelization and Faith Formation,  
1070 Cecil Avenue South, Millersville, MD 21108**

**I accept my responsibility to cooperate with Our Lady of the Fields in my commitment to participate in the Mass and parish life. I will support my family's formation by regular participation in Faith Formation, and on-going formation for us all.**

**Parent/Legal Guardian signature:** \_\_\_\_\_ **(Date)** \_\_\_\_\_

**(Form must be signed and dated in order to process your child's registration.)**

**We rely on volunteers for successful Faith Formation Programs. Please indicate the area in which you will help us.**

Catechist/ Co-Catechist  Assistant  Aide  Hall Monitor  Substitute (Catechists, Assistants and Hall Monitors will receive a 50% reduction in tuition.)

Name: \_\_\_\_\_ For Grade(s): \_\_\_\_\_ Day: \_\_\_\_\_ Time: \_\_\_\_\_

(All volunteers must be in full compliance with the Archdiocesan Guidelines for the Protection of Children and Youth before they can work with children.)

**Volunteer Opportunities: (Please X all that applies to your family. Indicate with an M and we will send you more information.)**

Evangelization & Catechesis		Liturgy & Music	Adult Catechesis and Community Opportunities		
<input type="checkbox"/>	Catechist or Co-Catechist	<input type="checkbox"/>	Lector	<input type="checkbox"/>	Christ Life
<input type="checkbox"/>	Assistant	<input type="checkbox"/>	Extraordinary Minister of Communion	<input type="checkbox"/>	Women in Faith (Tuesday AM)
<input type="checkbox"/>	Aide (teens)	<input type="checkbox"/>	Hospitality/ Usher and Greeter	<input type="checkbox"/>	Walking With Purpose for Women (Mon PM and Thurs AM)
<input type="checkbox"/>	Substitute Catechist	<input type="checkbox"/>	Sacristan	<input type="checkbox"/>	Holy Name <input type="checkbox"/> Knights of Columbus
<input type="checkbox"/>	Hall Monitor	<input type="checkbox"/>	Choir	<input type="checkbox"/>	Men's Bible Study (Meets Mon. or Wed. nights)
<input type="checkbox"/>	Parent Formation**	<input type="checkbox"/>	Minister of Care	<input type="checkbox"/>	That Man Is You (Tuesday mornings @ 6AM)
<input type="checkbox"/>	Parent Formation Facilitator**	<input type="checkbox"/>	Altar Server	<input type="checkbox"/>	Wednesday at the Well @ 6PM
<input type="checkbox"/>	LIFETEEN <input type="checkbox"/> Core Team	<input type="checkbox"/>	Adoration Chapel Guardian	<input type="checkbox"/>	Rosary for Cancer Ministry (Tuesday evenings)
<input type="checkbox"/>	EDGE <input type="checkbox"/> Core Team	<input type="checkbox"/>	Children's Choir pianist	<input type="checkbox"/>	Hospitality <input type="checkbox"/> Greeters
<input type="checkbox"/>	Christian Family Movement	<input type="checkbox"/>	Middle School Choir	<input type="checkbox"/>	Order of Widows
<input type="checkbox"/>	Sacramental Preparation Team	<input type="checkbox"/>	Teen Choir	<input type="checkbox"/>	Funeral Reception Committee
<input type="checkbox"/>	Confirmation Mentor	<input type="checkbox"/>	Liturgy of the Word for Children	<input type="checkbox"/>	Bereavement Group
<input type="checkbox"/>	RCIA Team	<input type="checkbox"/>	<input type="checkbox"/> Prayer Leader	<input type="checkbox"/>	Nursing Home / Home Visitors
<input type="checkbox"/>	RCIA Mentor	<input type="checkbox"/>	<input type="checkbox"/> Music Leader	<input type="checkbox"/>	Care for Creation
<input type="checkbox"/>	Pre-Cana /Marriage Prep Team	<input type="checkbox"/>	<input type="checkbox"/> Classroom Oversight	<input type="checkbox"/>	Winter Relief <input type="checkbox"/> Our Daily Bread
<input type="checkbox"/>	Traffic Calming / Safety Officer	<input type="checkbox"/>	<input type="checkbox"/> Assembly Guide	<input type="checkbox"/>	Breaking Bread with the Hungry (Fridays in Baltimore)
<input type="checkbox"/>	Prayer Partners	<input type="checkbox"/>		<input type="checkbox"/>	Severna Park Assistance Network
<input type="checkbox"/>	Donations for Crafts for Classes	<input type="checkbox"/>		<input type="checkbox"/>	Sarah's House
<input type="checkbox"/>	Donations for Bibles for Classrooms	<input type="checkbox"/>	Church Decorating Committee	<input type="checkbox"/>	Right to Life Ministry
<input type="checkbox"/>	Vacation Bible School	<input type="checkbox"/>		<input type="checkbox"/>	Social Justice Advocacy Group
<input type="checkbox"/>	Intercessory Prayer for Students and Catechists	<input type="checkbox"/>	OTHER:	<input type="checkbox"/>	Other Christian Advocacy Groups: (Please specify)
<input type="checkbox"/>	Scouting Program Coordinator	<input type="checkbox"/>		<input type="checkbox"/>	Social Committee
<input type="checkbox"/>	OTHER:	<input type="checkbox"/>		<input type="checkbox"/>	Singles Again Ministry

**\*\*Parent Formation:** I, \_\_\_\_\_, would like to participate in Parent Formation (including bible studies, adult formation, or prayer groups) which take place  during my child's Faith Formation session or,  in my community, and are led by parish facilitators. Sessions will begin later in the autumn. You may make requests for topics. Email [andrea@olfparish.com](mailto:andrea@olfparish.com) for more information, or to lead a group.

I, \_\_\_\_\_, am willing to host Parent Formation  during my child's Faith Formation session, or  in my home or neighborhood.