**Faith Formation Re-Registration -- 2025-2026 Church of the Assumption**

P.O. Box 547, Hackettstown, NJ 07840-0547 [faithformation@assumptionbvmnj.org](mailto:faithformation@assumptionbvmnj.org) (908) 303-9692

**PAYMENT IN FULL IS DUE AT THE TIME OF REGISTRATION AND MUST BE RECEIVED  
TO BE ADDED TO THE CLASS ROSTER AND EMAIL DISTRIBUTION LIST.  
 REGISTRATION WITHOUT PAYMENT WILL AUTOMATICALLY BE PLACED ON HOLD.**

* **Early-bird discount: MARCH 5—MAY 7**

$100 for one child, $150 for two, $200 for three or more children.

**Preparation Fee** (cost of gowns, banners, prayer book, retreats, Mass, etc**.)**

$25 First Communion $20 Confirmation I $50 Confirmation II

* **Regular Registration Fee for 2025-2026: MAY 8-JUNE 31**

$125 for one child; $180 for two, $220 for three or more children.

**Preparation Fee** (cost of gowns, banners, prayer book, retreats, Mass, etc**.)**

$25 First Communion $20 Confirmation I $50 Confirmation

* **Late Registration Fee for 2025-2026: JULY 1 to SEPTEMBER 1 (closed)**

$175 for one child; $255 for two, $295 for three or more children.

**Preparation Fee** (cost of gowns, banners, prayer book, retreats, Mass, etc**.)**

$25 First Communion $20 Confirmation I $50 Confirmation

* **Faith Formation Catechist Discount:**

Cost per child if Mother or Father is Catechist

$75 for one child, $100 for two, $175 three or more

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| **Family**  **(Complete all)** | | **Child’s Name**  **(Child’s full name if different from Family Name)** | **Public School Grade 2025-2026 year** | **Placement**  **DRE will complete** |
| **Family Last Name**  **\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Father**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mother\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mother Maiden\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Mass your family attends:  Saturday 5:30\_\_\_\_ 7:00PM\_\_\_\_\_  Sunday: 8:00\_\_\_\_\_ 10:00\_\_\_\_\_ | | Baptized (Y/N) |  |  |
| Baptized (Y/N) |  |  |
| Baptized (Y/N) |  |  |
| **Cell #** | | **Emergency #** | **Alternate contact #** | |
|  | |  |  | |
| **Address** |  | | | |
| **E-Mail** |  | | | |

**Photo Release:** I give permission for my child/ren to be photographed during class times and other program events.  I understand that these images may be used in a display inside church property and/or posted on the parish website, and/or may be submitted to local newspapers.

**Signature:**   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent Print:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Special Needs or Allergies:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_