

MOST BLESSED SACRAMENT FAITH FORMATION

REGISTRATION FORM 2026-2027

REGISTRATION FEES: \$125/FAMILY IF RECEIVED BEFORE JULY 15/ \$150/FAMILY AFTER JULY 15

ALL FEES ARE WAIVED FOR VOLUNTEERS. NO ONE IS DENIED ENROLLMENT DUE TO FINANCIAL CONSTRAINTS.

Parent's Contact Information: If you are new to MBS, also fill out the *Online Parish Registration*

Father's First and Last Name:	Father's Email:
Mother's First and Last Name: <i>Mother's Maiden Name:</i>	Mother's Email:
Best Phone Number to reach you at:	In Case of Emergency Contact Information:
Mailing Address:	

Student Information:

All students enrolled in Faith Formation must present a baptismal certificate in Grade 1

All students enrolled in Faith Formation for the 1st time must present a baptismal certificate and a First Communion certificate.

Students in sacramental years (2nd grade and 8th grade/HS**) are required to attend in person classes.

***Exception for students enrolled in a Catholic School.

1. Child's Name:		Child's Grade for 2026-2027: _____ ☐ In-Person Class ☐ At Home Lessons (Not 2nd or 8th/HS) ☐ Attends a Catholic School
Child's DOB:	Date and Place of Baptism: <i>If not at MBS, please provide certificate</i>	Date and Place of First Communion: <i>If not at MBS, please provide certificate</i>
Challenges and/or food allergies/allergies that we should be aware of:		
2. Child's Name:		Child's Grade for 2026-2027: _____ ☐ In-Person Class ☐ At Home Lessons (Not 2nd or 8th/HS) ☐ Attends a Catholic School
Child's DOB	Date and Place of Baptism: <i>If not at MBS, please provide certificate</i>	Date and Place of First Communion: <i>If not at MBS, please provide certificate</i>
Challenges and/or food allergies/allergies that we should be aware of:		

Please list additional children on the back of this form.

Contact Kathy Casey, Coordinator if you have any questions at kathy.casey@mbsparishwakefield.com

3. Child's Name:		Child's Grade for 2026-2027: _____ _____ In-Person Class _____ At-Home Lessons (Not 2nd or 8th/HS) _____ Attends a Catholic School
Child's DOB	Date and Place of Baptism: <i>If not at MBS, please provide certificate</i>	Date and Place of First Communion: <i>If not at MBS, please provide certificate</i>
Challenges and/or food allergies/allergies that we should be aware of:		

4. Child's Name:		Child's Grade for 2026-2027: _____ _____ In-Person Class _____ At-Home Lessons (Not 2nd or 8th/HS) _____ Attends a Catholic School
Child's DOB	Date and Place of Baptism: <i>If not at MBS, please provide certificate</i>	Date and Place of First Communion: <i>If not at MBS, please provide certificate</i>
Challenges and/or food allergies/allergies that we should be aware of:		

Important - Please Note our MAILING ADDRESS is different than our physical location:

MBS/Attn Kathy Casey, 429 Upham Street, Melrose MA 02176

Or you can drop off in the Faith Formation letter box outside the back of the church (MBS).

Physical Address for Classes & MBS FF Office is 1155 Main Street, Wakefield