

FAITH FORMATION

ST. JOHN XXIII CATHOLIC PARISH | 2026-2027

16800 Miramar Parkway, Miramar, FL 33027



Baptism, First Communion, and Confirmation are sacred milestones in your child's life of faith.

This form helps the parish understand your child's needs and place them in the appropriate faith formation class. Please complete one form per child, include any required sacrament certificates, and submit it with the registration fee to the parish office.

STUDENT INFORMATION

First Name	Last Name
<input type="text"/>	<input type="text"/>
Date of Birth (MM/DD/YYYY)	Country of Birth
<input type="text"/>	<input type="text"/>
Grade	School Name
<input type="text"/>	<input type="text"/>

GUARDIAN INFORMATION

GUARDIAN 1	Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Other:	<input type="text"/>
First Name	Last Name	
<input type="text"/>	<input type="text"/>	
Phone	Email	
<input type="text"/>	<input type="text"/>	
Address		
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

GUARDIAN 2	Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Other:	<input type="text"/>
First Name	Last Name	
<input type="text"/>	<input type="text"/>	
Phone	Email	
<input type="text"/>	<input type="text"/>	
Address	<input type="checkbox"/> Same address as Guardian 1	
<input type="text"/>		
City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>

EMERGENCY CONTACT Parents/guardians will be contacted first in an emergency.

Relationship to Student: <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Other:	<input type="text"/>
Name	Phone
<input type="text"/>	<input type="text"/>

MEDICAL / SPECIAL NEEDS INFORMATION

Allergies:

Medical conditions or significant medical history:

Medication needs, including type and frequency:

Special learning, behavioral, accessibility, or support needs:

PERMISSIONS

Yes No **Do you give permission for your child to attend Teaching Boundary Safety lessons?**

Yes No **Do you authorize photos/videos of your child when taken in group settings, such as class, retreats, ceremonies, or parish catechetical activities?**

SACRAMENTAL PREPARATION

Complete this section only if the student is registering for Sacramental Preparation. Certificates are required for any sacraments already received.

BAPTISM

Select One

- Already received Baptism and will provide certificate
- I need to receive Baptism as part of Sacramental Preparation

If the student has not received Baptism, they may still apply. The parish needs this information so Baptism can be planned before First Communion.

FIRST COMMUNION

Select One

- Already received First Communion and will provide certificate
- Applying 2nd Year of First Communion Sacrament (Completed 1st Year)
- Applying 1st Year of First Communion preparation

If year 1 was completed

Year Completed

Parish/Program

CONFIRMATION

Select One – If applicable

- Applying 2nd Year of Confirmation Sacrament (Completed 1st Year)
- Applying 1st Year of Confirmation Preparation

If year 1 was completed

Year Completed

Parish/Program

REGISTRATION FEE

Number of children being registered:

- 1 Child 2 Children 3 or More Children

Registered parish Family?:

- Yes No

Parish Member Envelope Number, if Registered:

Number of children	Registered Parish Family	Non-Registered Family
1 Child	\$175	\$275
2 Children	\$225	\$325
3 or More Children	\$300	\$400

If the registration fee is a concern, please contact the parish office. We want to work with families and help where possible.

PARENT / GUARDIAN SIGNATURE

- I understand that registration is not complete until the completed form, required documents, and registration fee are submitted in person to the parish office.
- I understand that my child is expected to participate in Sunday Mass and that my child is expected to attend Faith Formation classes regularly. Three or more absences from Mass or class may require review with the parish and may affect my child's ability to complete the sacramental preparation year.
- I certify that all information provided on this registration form is true and correct. I am the parent or authorized guardian of the child named on this form and am authorized to submit this registration.

Guardian 1 – Printed Name

Guardian 1 – Signature

____/____/____
Date

Guardian 2 – Printed Name

Guardian 2 – Signature

____/____/____
Date