

2025-2026

CHILDREN'S FAITH FORMATION REGISTRATION FORM

Registered in Parish? If you have not officially registered at Incarnation, we will be unable to enter your child's information in our database. You will need to fill out the Parish Registration Form that is enclosed and return it to the parish office.

Family Last Name (Please Print): _____ Today's Date: _____ Primary Language _____

Father's Name: _____ Religion: _____ Work/Cell # _____

Mother's Name: _____ Religion: _____ Work/Cell # _____

Address: _____ City/State/Zip: _____

Home Phone: _____ Primary Email (Please Print Neatly) _____

Secondary Email _____

Cell Phone Number to be used for FLOCKNOTE COMMUNICATIONS from this office:

All classes are filled on a first come, first served basis. Early registration is encouraged.

_____ Sunday	During 10:30 a.m. Mass	3,4-year-olds
_____ Sunday	9:00 a.m. – 10:15 a.m.	Grades K thru 7, Confirmation Prep Grades 8-12
_____ Wednesday	5:30 p.m. – 6:45 p.m.	Grades 1 thru 7, Confirmation Prep Grades 8-12, RCIC Grades 3-8

For sacramental preparation this parish follows the policy set forth by the Catholic Diocese of Memphis.

A child must have TWO consecutive years of formation leading to reception of any sacrament.

Tuition*: 1 Child: \$80.00; 2 Children: \$150.00; 3 or more Children: \$200.00*

****Sacramental yearly fees are not included in tuition fee.***

Sacramental year fees per child: 1st Recon. / 1st Comm. Fee (2nd gr. or RCIC) \$40.00

Confirmation Fee (Confirmation Prep Grades 8-12) \$40.00

☞ **Student Last Name:** _____ **First Name:** _____ **Grade 2025-2026 year:** _____

Birth Date: _____ **Age:** _____ **Gender:** _____ **School:** _____

Baptized? Yes__ No__ Date/Place: _____

1st Communion? Yes__ No__ Date/Place: _____ **1st Reconciliation? Yes__ No__**

Confirmation? Yes__ No__ Date/Place: _____

Last Catholic School or Parish Religious Education Attended Year _____ Grade _____ Parish _____

☞ **Student Last Name:** _____ **First Name:** _____ **Grade 2025-2026 year:** _____

Birth Date: _____ **Age:** _____ **Gender:** _____ **School:** _____

Baptized? Yes__ No__ Date/Place: _____

1st Communion? Yes__ No__ Date/Place: _____ **1st Reconciliation? Yes__ No__**

Confirmation? Yes__ No__ Date/Place: _____

Last Catholic School or Parish Religious Education Attended Year _____ Grade _____ Parish _____

PLEASE NOTE: A copy of your child's (ren's) Baptismal Certificate will be needed to be attached to this form. As soon as you receive this form, please complete and return it to the PRE office with payment and appropriate sacramental paperwork.

☞ Turn page over for medical information.