

St. Gabriel the Archangel Parish
3040 Hamburg Street
Schenectady, NY 12303
(518)355-4193/Fax (518)982-1035
stgabriels.faithformation@aol.com



St. Madeleine Sophie Parish
3514 Carman Road
Schenectady, NY 12303
(518)355-3115/Fax (518)280-0071
ffo@smsparish.org

At which Parish are you registered? St. Gabriel's _____ St. Madeleine Sophie _____
Another Parish? No _____ Yes _____ Name of Church: _____

If you want to register as SGA/SMS parishioners, contact the Faith Formation Office or click on this link:
<https://smssgabparish.org/wp-content/uploads/2023/05/Parish-Registration-2023.pdf>

2024-2025 FAITH FORMATION PROGRAM REGISTRATION FOR GRADES 1-11

Family Last Name:	Child's Last Name (if different):
Mailing Address:	City/Zip:
Home Phone:	Mother's Maiden Name:
Father's Name:	Mother's Name:
E-mail:	E-mail:
Cell:	Cell:
Work:	Work:
Occupation:	Occupation:
Religion:	Religion:

Marital status: () Married () Single () Separated () Divorced () Widowed

If there is an additional parent address where mail should be sent, provide the information on line below:

2024-25 Faith Formation Program Registration Fees:

- **For SMS/ SGA Parish Families: 1 Child - \$75; 2 Children - \$130; 3 or more children - \$160**
- **For Non-Parishioners: add \$50.00 family fee** to help defray Parish expenses for our FF Program.
- **For child(ren) making First Holy Communion (usually in Gr. 2) or Confirmation (usually in Gr. 11): add \$25 Sacramental Fee per child receiving in this program year ONLY.**

Please contact the FF Office directly if the program fees present a financial hardship for your family.

Payment can be made in cash, by checks made payable to **Saint Madeleine Sophie Church**, or online at:
<https://www.wesharegiving.org/App/Form/acd3eccb-20ce-4c9d-9093-872c2fa625f6> (click "One time" to pay.)
Return FF form/fee to the **St. Madeleine Sophie Faith Formation Office (at the address above)** where your registration will be processed; St. Gabriel's Church will receive fees paid by SGA Parish families.

For office use only:

Staff _____	Date Received: _____	Reg. #: _____
Fee rec'd: \$ _____	Pd. By: Check # _____	Cash: _____
Active in PDS? _____	In classes? _____	Folders? _____
		Bapt. Certificate per child? _____

2024-2025 SMS/SGA FAITH FORMATION SESSION SCHEDULE FOR GRADES 1 TO 11

(The schedule below will be revised if there aren't enough students enrolled or catechists to teach.)

➔ **Based on Diocesan guidelines, children need to complete Faith Formation sessions (which begin in the fall) and Sacramental preparation before receiving First Communion or Confirmation this year.**

USE SESSION {LETTERS} BELOW TO ENROLL EACH CHILD IN THE SMS/SGA FAITH FORMATION PROGRAM

Session	Grade	Day/Time	Students Meet:
{ A }	Grades 1-6	Tuesday 5:00 - 6:00 PM	Weekly at SGA School Bldg.
{ B }	Grades 1-5	Thursday 4:00 - 5:00 PM	Weekly at SMS School Bldg. / Parish Hall
{ C }	Grades 6-10	Sunday 12 noon - 1:00 PM	10 Sessions – SGA School Bldg.
{ D }	Grades 6-10	Monday 6:30 - 7:30 PM	10 Sessions – SGA School Bldg.
{ E }	Grades 1, 3-10	Independent Study – At Home	Complete Grade level book/required on-line chapter reviews; ➔ Not for Grade 2 or 11
{ F }	Gr. 11, Confirmation	Sunday 12 noon - 1:30 PM or Monday 6:30 - 8pm	Confirmation Prep - SMS Parish Hall (**Use link below to sign up for Session)

****Signup Link for Fall 2024 Confirmation Session:** <https://www.signupgenius.com/go/5080F4CAEAA2FA4F85-48784741-sign>

Are you registering a new child(ren) this year? No Yes (If yes, please provide a copy of Baptismal Certificate(s) from the Church if other than SMS/St. Gabriel's to complete enrollment.)

1. Name: _____ Faith Formation Gr. in 9/24: _____ Session letter: _____

Birthdate: _____ School Grade: _____ School Name: _____

Is this child a Baptized Catholic? NO YES at: SMS or St. Gabriel's

_____ Other? (Church Name/address): _____

2. Name: _____ Faith Formation Gr. in 9/24: _____ Session letter: _____

Birthdate: _____ School Grade: _____ School Name: _____

Is this child a Baptized Catholic? NO YES at: SMS or St. Gabriel's

_____ Other? (Church Name/address): _____

3. Name: _____ Faith Formation Gr. in 9/24: _____ Session letter: _____

Birthdate: _____ School Grade: _____ School Name: _____

Is this child a Baptized Catholic? NO YES at: SMS or St. Gabriel's

_____ Other? (Church Name/address): _____

PLEASE RESPOND:

- How will your child(ren) get to Faith Formation? _____
- Do you have a child in Grade 3 or older who still needs to receive First Holy Communion? No Yes
- Any food allergies, medical, educational issues? _____

Faith Formation Program Volunteer Opportunities

Are YOU interested in lending a hand? Please consider helping in one or more of the ways below!

_____ *No, not at this time*

_____ *YES, I/we can serve in the following ways:*

(check all that apply):

_____ Catechist (Teacher)

_____ Classroom Aide to Catechist

_____ Substitute Catechist: I would be available on _____ (day of week)

_____ High School Youth as a Catechist/Aide for grades 1-6

_____ Safety/Hall Monitor during Faith Formation sessions

_____ Office Aide during class sessions

_____ Children's Liturgy of the Word Catechist/Aide at Sunday Mass (9am @SMS; 10:30am @SGA)

_____ Baker for Faith Formation events (i.e., Confirmation reception, First Communion retreat, etc.)

_____ Volunteer at receptions/events

_____ Chaperone for service projects, activities

Parent/Guardian Consent - Photo/Video Release

_____ **Permission is granted** for my child(ren) to be photographed during class sessions and related activities sponsored by the Faith Formation Office during the 2024-25 program year. I further agree that these photos (still and moving) **may be used without names** in a variety of contexts to spotlight the Faith Formation Program, including Parish and Diocesan websites, parish bulletin boards/newsletters, news releases for ***The Evangelist*** and community newspapers, etc.

_____ **Permission is not granted** for my child(ren) to be photographed during Faith Formation sessions/activities in the 2024-25 program year, except for projects to be sent home with my child(ren).

Parent/Guardian Signature: _____ **Date:** _____

Parent/Guardian Consent – Parish Buildings

I/we understand that on occasion, the children/youth in the Faith Formation Program walk over to the Church or other Parish buildings for religious services or instruction with their classes and catechists. By signing below, I/we give permission for my child(ren) to leave the classroom/school building for this purpose.

Parent/Guardian Signature: _____ **Date:** _____