

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

Where are you a *registered* Parish member? St. Gabriel's _____ St. Madeleine Sophie _____

Another Parish? No _____ Yes _____ Name of your Church: _____

If you want to enroll as parishioners of SGA or SMS Parish, contact the Faith Formation Office or

click this link to register: <https://smssgabparish.org/wp-content/uploads/2023/05/Parish-Registration-2023.pdf>

2025-2026 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

Provide information on the line below if there's an additional parent address where mail should be sent?

2025-26 FAITH FORMATION PROGRAM REGISTRATION FEES:

- **For SMS/SGA Parish Families:** 1 CHILD - \$75; 2 CHILDREN - \$130; 3 OR MORE CHILDREN - \$160
- **For NON-PARISHIONERS to help defray Parish expenses for the FF Program:** Additional \$50.00 Family Fee.
- **For children receiving First Communion (usually Gr. 2) or Confirmation (usually Gr. 11):**
add a \$25 Sacramental Fee per child receiving Sacrament during the 2025-26 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>.

Return your FF form/fee to the **St. Madeleine Sophie Faith Formation Office** regardless of parish.

For office use only: Staff _____

Date Received: _____

Reg. #: _____

Fee rec'd: \$ _____

Pd. By: Check # _____

Cash: _____

E:-giving: _____

Active in PDS? _____

In classes? _____

Folders? _____

Bapt. Certificate per child? _____

2025-2026 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.

<u>Session</u>	<u>Grade</u>	<u>Day/Time</u>	<u>Students Meet:</u>
{ A }	Grades 1-5	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 2025 Confirmation Session: https://www.signupgenius.com/go/5080F4CAEAA2FA4F85-55231284-sign			

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

Are you registering a new child(ren) this year? ☐ No ☐ Yes

(If yes, please provide a copy of the Baptismal Certificate from that Church if other than SMS/St. Gabriel's.)

1. Name: _____ Faith Formation Gr. in 9/25: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? ☐ NO ☐ YES at: ☐ SMS or ☐ St. Gabriel's
☐ Other? (Church Name/address): _____

2. Name: _____ Faith Formation Gr. in 9/25: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? ☐ NO ☐ YES at: ☐ SMS or ☐ St. Gabriel's
☐ Other? (Church Name/address): _____

3. Name: _____ Faith Formation Gr. in 9/25: _____ Session letter: _____
 Birthdate: _____ School Grade: _____ Public School: _____
 Is this child a Baptized Catholic? ☐ NO ☐ YES at: ☐ SMS or ☐ St. Gabriel's
☐ Other? (Church Name/address): _____

PLEASE RESPOND TO ANY QUESTIONS BELOW THAT APPLY:

- 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 1-5

_____ 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 2025-26 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 while participating in Faith Formation sessions/activities during the 2025-26 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 Faith Formation children/youth 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/our child(ren) to leave the classroom/school building for this purpose.

Parent/Guardian Signature: _____ Date: _____