

# St John Neumann Church

## Family of Faith Registration

Please return this form to Julie Bando:  
jbando@stjohnsunbury.org

Term: 2026-2027

9633 E State Rt 37, Sunbury, OH 43074

If your child has missed receiving Eucharist or Confirmation for any reason, and they would like to begin or continue the process for Sacramental preparation, please check the appropriate box under Sacrament Details and note "Missed".

### FAMILY INFORMATION

Family Last Name: \_\_\_\_\_

Date: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Father's Cell / Work: \_\_\_\_\_

Mother's Name: \_\_\_\_\_

Mother's Cell / Work: \_\_\_\_\_

Mother's Maiden: \_\_\_\_\_

Email Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Home Address: \_\_\_\_\_

Emergency Phone: \_\_\_\_\_

City, ST Postal: \_\_\_\_\_

I give permission for photos/videos of my child to be used in parish publications, social media, and promotional materials.

Y  N

### STUDENT #1 INFORMATION

Child Name: \_\_\_\_\_

Catholic? Yes No

Gender:  Male  Female

#### Sacrament Details

Check & date all below; if a Sacrament was missed, please check and note "MISSED"

Birth Date: \_\_\_\_\_

Baptism: \_\_\_\_\_

Grade: \_\_\_\_\_

Eucharist: \_\_\_\_\_

School: \_\_\_\_\_

Reconciliation Prep: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Special Needs (Medical, Learning Disabilities, Physical Disabilities, etc):  
\_\_\_\_\_

### STUDENT #2 INFORMATION

Child Name: \_\_\_\_\_

Catholic? Yes No

Gender:  Male  Female

#### Sacrament Details

Check & date all below; if a Sacrament was missed, please check and note "MISSED"

Birth Date: \_\_\_\_\_

Baptism: \_\_\_\_\_

Grade: \_\_\_\_\_

Eucharist: \_\_\_\_\_

School: \_\_\_\_\_

Reconciliation Prep: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Special Needs (Medical, Learning Disabilities, Physical Disabilities, etc):  
\_\_\_\_\_

Payment may be made via: check payable to SJN (memo Family of Faith)

Tuition per Family: \$225

or online at:

Yearly food cost for High School Students: \$200 suggested donation-

<https://saintjohnsunbury.org/give> (scroll to "Events" on this page)

NOTE: If any of your children were baptized outside of this parish, and you have not already supplied us with a copy of each child's baptismal record, you will need to supply a copy for our files.

Tuition DUE: \$ \_\_\_\_\_ Tuition PAID: \$ \_\_\_\_\_ Signature: \_\_\_\_\_

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### Additional Students

#### STUDENT #3 INFORMATION

Child Name: \_\_\_\_\_

Gender:  Male  Female

Birth Date: \_\_\_\_\_

Grade: \_\_\_\_\_

School: \_\_\_\_\_

Catholic? Yes No

#### Sacrament Details

Check & date all below; if a Sacrament was missed, please check and note "MISSED"

Baptism: \_\_\_\_\_

Eucharist: \_\_\_\_\_

Reconciliation Prep: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Special Needs (Medical, Learning Disabilities, Physical Disabilities, etc):  
\_\_\_\_\_

#### STUDENT #4 INFORMATION

Child Name: \_\_\_\_\_

Gender:  Male  Female

Birth Date: \_\_\_\_\_

Grade: \_\_\_\_\_

School: \_\_\_\_\_

Catholic? Yes No

#### Sacrament Details

Check & date all below; if a Sacrament was missed, please check and note "MISSED"

Baptism: \_\_\_\_\_

Eucharist: \_\_\_\_\_

Reconciliation Prep: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Special Needs (Medical, Learning Disabilities, Physical Disabilities, etc):  
\_\_\_\_\_

#### STUDENT #5 INFORMATION

Child Name: \_\_\_\_\_

Gender:  Male  Female

Birth Date: \_\_\_\_\_

Grade: \_\_\_\_\_

School: \_\_\_\_\_

Catholic? Yes No

#### Sacrament Details

Check & date all below; if a Sacrament was missed, please check and note "MISSED"

Baptism: \_\_\_\_\_

Eucharist: \_\_\_\_\_

Reconciliation Prep: \_\_\_\_\_

Confirmation: \_\_\_\_\_

Special Needs (Medical, Learning Disabilities, Physical Disabilities, etc):  
\_\_\_\_\_