

St John Neumann Church

Family of Faith Registration

Term: 2025-2026

9633 E State Rt 37, Sunbury, OH 43074

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

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 box under Sacraments missed and indicate which Sacrament

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: _____ Both Parents Catholic? Yes / No

STUDENT #1 INFORMATION

Child Name: _____ **Catholic?** Yes / No

Gender: Male ☐ Female

Sacrament Details Check & Date All Below

Birth Date: _____ **Sacraments Needed**

Grade: _____ ☐ Baptism: _____ Eucharist

School Attending: _____ ☐ Eucharist: _____ Confirmation

☐ 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

Birth Date: _____ **Sacraments Needed**

Grade: _____ ☐ Baptism: _____ Eucharist

School Attending: _____ ☐ Eucharist: _____ Confirmation

☐ 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 on line at:
www.wesharegiving.org/app/giving/WeShare-20001848?tab=home

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

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: _____

Catholic? Yes / No

Gender: ☐ Male ☐ Female

Sacrament Details Check & Date All Below

Birth Date: _____

☐ Baptism: _____

Sacraments Needed

Grade: _____

☐ Eucharist: _____

Eucharist

School Attending: _____

☐ Reconciliation Prep: _____

Confirmation

☐ Confirmation: _____

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

STUDENT #4 INFORMATION

Child Name: _____

Catholic? Yes / No

Gender: ☐ Male ☐ Female

Sacrament Details Check & Date All Below

Birth Date: _____

☐ Baptism: _____

Sacraments Needed

Grade: _____

☐ Eucharist: _____

Eucharist

School Attending: _____

☐ Reconciliation Prep: _____

Confirmation

☐ Confirmation: _____

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

STUDENT #5 INFORMATION

Child Name: _____

Catholic? Yes / No

Gender: ☐ Male ☐ Female

Sacrament Details Check & Date All Below

Birth Date: _____

☐ Baptism: _____

Sacraments Needed

Grade: _____

☐ Eucharist: _____

Eucharist

School Attending: _____

☐ Reconciliation Prep: _____

Confirmation

☐ Confirmation: _____

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