

# Saint Mary's Office of Faith Formation

## Catechist Registration 2025-2026



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

Address: \_\_\_\_\_ City/Town: \_\_\_\_\_

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

In Case of emergency, contact: \_\_\_\_\_

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

### 2024-25 Class Schedule

Grades 1-5 Sunday 9:15-10:15 am

Grades 1-5 Monday 4:15-5:15 pm

Grades 6-9 Every other Sunday 6:00-7:30 pm

Grade you will teach: \_\_\_\_\_ Co-teacher: (If applicable) \_\_\_\_\_

Previous Faith Formation experience:

---

---

---

What would you most like to see happen in the Faith Formation Program this year? Both as a catechist and for your students.

---

---

---

Are there any specific topics you would like addressed in workshops for you?

---

---

**Thank you for volunteering. Be assured that we will do all that we can to support your efforts in the program and in your faith journey. Please do not hesitate to contact us with any and all questions and comments.**

**Liz MacDonald**  
**Director Of Faith Formation**  
**(508)-285-3237**  
**Dre@stmarysnorton.com**