

Please complete all the information on the form for each child. It must be on file.

## Nativity B.V.M.

### C.C.D. Registration Form

Student's Name: \_\_\_\_\_

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

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

\_\_\_\_\_

DOB: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Religion: \_\_\_\_\_

Mother's Name (and maiden): \_\_\_\_\_

Religion: \_\_\_\_\_

Parents are: Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_

Who has custody of the student? \_\_\_\_\_

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

Sacrament information:

Sacrament      yes or no      date      Parish

Baptism \_\_\_\_\_

Reconciliation \_\_\_\_\_

1<sup>st</sup> Communion \_\_\_\_\_

Mass for bringing up the gifts: 5 PM ----- 7 AM ----- 9 AM ----- 11 AM -----

Does your child have any special needs we should be aware of?

\_\_\_\_\_

Allergies? \_\_\_\_\_

Is your family registered at Nativity? Yes \_\_\_\_\_ No \_\_\_\_\_

E-Mail Address \_\_\_\_\_