

2020-2021
Student Information for
Basilica of the Sacred Heart of Jesus Parish
Grades 1-8

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name(s) _____

Address: _____

Mom/Guardian Phone Number: _____

E-mail Address: _____

Dad/Guardian Phone Number: _____

E-mail Address: _____

Are you a registered member of Sacred Heart Parish: YES NO

If "No", where are you registered? _____

PLEASE COMPLETE THE CHILD INFORMATION ON THE NEXT PAGE

Adam & Bridget Wurtz 717-630-1144 ajwurtz@earthlink.net

PARENT/GUARDIAN NAME: _____

Student Information

Child's Name: _____ Age: ____ Grade: ____

Date of Birth: _____

Baptized at Sacred Heart? Yes ____ Date of Baptism _____

IF NO, the following information is **required:**

Church of Baptism _____

City, State of Baptism _____

Date of Baptism _____

Child's Name: _____ Age: ____ Grade: ____

Date of Birth: _____

Baptized at Sacred Heart? Yes ____ Date of Baptism _____

IF NO, the following information is **required:**

Church of Baptism _____

City, State of Baptism _____

Date of Baptism _____

Child's Name: _____ Age: ____ Grade: ____

Date of Birth: _____

Baptized at Sacred Heart? Yes ____ Date of Baptism _____

IF NO, the following information is **required:**

Church of Baptism _____

City, State of Baptism _____

Date of Baptism _____

PARENT/GUARDIAN NAME: _____

Child's Name: _____ Age: ____ Grade: ____

Date of Birth: _____

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