

NAME OF PARISH _____

FAMILY NAME _____ FIRST _____ MIDDLE _____ M
F DATE OF BIRTH: MO., DAY, YEAR _____

ADDRESS _____ ZIP CODE _____ TELEPHONE _____


Date registered:	Grade entering:	School entered from:	Grade	School attending (public) at present:	Grade
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FAMILY RECORD

Full name of father or guardian:	Business phone:	Living <input type="checkbox"/> Deceased <input type="checkbox"/>	Religion:
Full maiden name of mother:	Business phone:	Living <input type="checkbox"/> Deceased <input type="checkbox"/>	Religion:

List first names of other children in the family:

SACRAMENTAL RECORD

	DATE	CHURCH	CITY & STATE
BAPTISM			
EUCCHARIST			
			
CONFIRMATION			

Please give any significant information pertinent to your child's participation in religion class:

ACADEMIC AND ATTENDANCE RECORD

Grade	Year	Textbook	Teacher	Participation in Class	Comprehension of Material	No. of Class Days	Present	Absent	Comments Attached
Pre-School	19								
1	19								
2	19								
3	19								
4	19								
5	19								
6	19								
7	19								
8	19								
9	19								
10	19								
11	19								
12	19								

(TEACHERS' COMMENTS, IF ANY, SHOULD BE ATTACHED ON A SEPARATE SHEET OR CARD.)