

NAME:

ST. CHARLES BORROMEO PARISH CATHOLIC FAITH FORMATION 7580 CENTER PARKWAY, SACRAMENTO, CA 95823 TELEPHONE NO. CFF OFFICE: 916-421-7174

	and MIDDLE NAME								
HOME ADDRESS: (updated)					City ZIP CODE				
DATE OF BIRTH: (child registering)					BIRTHPLACE:				
Registered Parishioner at St. Charles Borromeo Parish				Yes	No	To Regist	erRegiste	ered	
Father's Name:(upo				dated) Phone no. Home:			Cell:		
Mother's Name:			Phone No. Home:			(Updated) Cell:			
Marital Status: Married		Married	Widow/Widower:		Single Parent Mother/Father		Divorced		
Other	:		Cell:						
IN CASE OF EMERGENCY PLEASE CONTACT: Name:					Cell: Contact no. Confirmation I Confirmation II				
SACRAMENTS Preparation: Baptism_			First Communion _		Confirmation I		Confirmation	Confirmation II	
Date o	of Baptism:	Cert	ificate: Date of First Communion: Certificate:						
	-								
				REG	STRATION		Check Number		
SCHOOL	CFF GRADE	CATECHETICAL	CATECHIST/TEACH	ER & c	ther FEES	DATE	/Cash	RECEIPT NUMBER	
GRADE		YEAR							
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REGISTRATION FEE: \$85.00 (all students)

Other Fees: First Communion and Confirmation

Inquire CFF office by calling or seeing In-Person.