



THE CATHEDRAL OF CHRIST THE LIGHT

Please use black or blue pen and PRINT clearly.
Please send form or drop off with the appropriate FEE at the Parish Office (address below).
Please provide a copy of your child's Baptism and First Communion certificates if you have not yet done so previously.

CHILD'S INFORMATION

NAME OF THE CHILD <i>(First, Middle, Last)</i>		GRADE: 2017–2018 school year
ADDRESS <i>(Street)</i>		<i>(City)</i> <i>(Zip)</i>
HOME TELEPHONE	PARENT EMAIL	
DATE OF BIRTH <i>(Month-Day-Year)</i>	GENDER: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	

SACRAMENTS INFORMATION

BAPTISM: <i>(Month-Day-Year)</i> <i>(Church, City)</i>	Needs to be Baptized <input type="checkbox"/>
1ST COMMUNION: <i>(Month-Day-Year)</i> <i>(Church, City)</i>	Needs 1st Communion <input type="checkbox"/>
CONFIRMATION: <i>(Month-Day-Year)</i> <i>(Church, City)</i>	Needs to be Confirmed <input type="checkbox"/>

PARENT/GUARDIAN INFORMATION

FATHER'S NAME <i>(First, Middle, Last)</i>	CATHOLIC: <input type="checkbox"/> Yes <input type="checkbox"/> No
MOTHER'S NAME <i>(First, Middle, Last)</i>	CATHOLIC: <input type="checkbox"/> Yes <input type="checkbox"/> No

EMERGENCY CONTACT ON SUNDAYS

NAME <i>(First, Middle, Last)</i>	RELATIONSHIP
HOME TELEPHONE	CELL PHONE

Please see back for Fee information

CHILDREN'S FAITH FORMATION REGISTRATION FORM—2017-2018

Fee:

First Child \$ 40.00
Each additional Child \$ 15.00

Late registration fee for each child
After October 1 +\$20.00

PARENT'S SIGNATURE

DATE

FOR OFFICE USE ONLY

FORM RECEIVED BY _____

RECEIVED ON _____

PAID: CASH CHECK # _____