

St. Bernadette Catholic Church

Faith Formation Programs

(Rel. Ed., Sacrament Prep., Confirmation, RCIA)

GENERAL REGISTRATION INFORMATION

INFORMATION FOR CHILD OR YOUTH #1

Payment Information	
Registration Fee:	_____
Paid by:	
Check # :	_____
Cash <input type="checkbox"/> CC / <input type="checkbox"/>	

First Name

Middle Initial

Last Name

Cell phone #

Date of Birth

Age

Sex

Male
Female

Name of School

City

Grade

Do you have any of the following documents for your child/youth? If yes, please attach a copy of the document(s) to this form.

Birth Certificate / Yes

Baptismal Certificate / Yes

1st Comm. Certificate Yes

What is the last year of Religious Education your child has attended? _____

Religious Sacraments Needed? _____

Living Arrangements : With both Parents / With Father / With Mother / With Guardian /

Are there any custody issues or a restraining order in place? Yes No

*If "yes", enclose a copy of the most recent applicable court order(s).

Given the nature of the program, does your child or youth have any physical, mental, emotional, cognitive, or other limitations or restrictions that would require the parish to make a minor adjustment to enable your child or youth to participate? Yes / No

If "yes", what type of restriction does your child or youth have or what adjustment(s) will be needed?

INFORMATION FOR CHILD OR YOUTH #2

First Name

Middle Initial

Last Name

Cell phone #

Date of Birth

Age

Sex

Male
Female

Name of School

City

Grade

PARENT OR GUARDIAN INFORMATION / INFORMACIÓN SOBRE EL PADRE, MADRE O GUARDIÁN

Father/ Guardian First and Last Name

Email

Address

City

Zip Code

Home Phone #

Work Phone #

Cellphone #

Mother / Guardian First and Last Name

Email

Address (if different)

City

Zip Code

Home Phone #

Work Phone #

Cellphone #

PARENT OR GUARDIAN SIGNATURE / FIRMA DEL PADRE, MADRE O GUARDIÁN

By signing this document, I give permission for my child/children/youth to participate in this faith formation program, whether conducted onsite or online. / *Al firmar este documento doy permiso para que mi hijo o hija participe de este programa de formacion en la fe, ya sea de forma presencial o en línea.*

Signature / Firma

Date / Fecha