

Last Name _____ First Name _____

Birthdate _____ Age as of 9/15/2020 _____ Gender: Male _____ Female _____

School _____ Grade (Fall 2020) _____

SACRAMENTS RECEIVED BY CHILD Date/Church/City/State

Baptism Yes No _____

First Reconciliation Yes No _____

First Eucharist Yes No _____

Confirmation Yes No _____

Previous Religious Ed. Year(s) Completed _____

SPTA _____ Other: _____

What we should know about your child (allergies, medical, behavioral, or physical conditions) _____

Check Desired Weekly Session Below:

____ Pre K thru Sixth Grade:

____ Middle School (7th-8th):

____ Senior Youth (9th-12th): (Includes Confirmed Middle School Students)

My Child Needs Sacramental Preparation:

____ 1st Eucharist Prep for 2021 (2nd Year prep)

____ 1st Eucharist Prep for 2022 (1st Year prep)

____ Confirmation Prep for 2021 (2nd Year prep Grade 8)

____ Confirmation Prep for 2022 (1st Year prep Grade 7- 8)

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