

Faith Formation

Child's name _____

(Last, First MI)

Date of Birth _____

Grade - *2021 - 2022* _____

Primary contact _____

Tel # Cell _____

Home _____

Text ok? _____

Email _____

Are you registered in the parish? _____

Sacraments received (location & year) _____ Baptism

_____ Reconciliation

_____ First Communion

_____ Confirmation

Please provide a copy of your child's birth and baptismal certificate. .

unless you provided one last year

For office use _____ Health form

_____ Baptismal Certificate

_____ Birth Certificate