

CHILD2 NAME: \_\_\_\_\_ Birthdate: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

GRADE ENTERING FOR RE (Circle please) P K 1 2 3 4 5 6 7 8 9 10 11 12

Has this student previously attended Religious Ed classes? Yes \_\_\_ No \_\_\_ Where? \_\_\_\_\_

SACRAMENTS RECEIVED - DATE / PLACE:

BAPTISM DATE/PLACE:

1ST CONFESSION DATE/PLACE

1ST HOLY COMMUNION DATE / PLACE

CONFIRMATION DATE / PLACE

MEDICAL INFORMATION SPECIAL CONCERNS ALLERGIES/DISABILITIES/DISORDERS

Please list here

CHILD3 NAME: \_\_\_\_\_ Birthdate: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

GRADE ENTERING FOR RE (Circle please) P K 1 2 3 4 5 6 7 8 9 10 11 12

Has this student previously attended Religious Ed classes? Yes \_\_\_ No \_\_\_ Where? \_\_\_\_\_

SACRAMENTS RECEIVED - DATE / PLACE:

BAPTISM DATE/PLACE:

1ST CONFESSION DATE/PLACE

1ST HOLY COMMUNION DATE / PLACE

CONFIRMATION DATE / PLACE

MEDICAL INFORMATION SPECIAL CONCERNS ALLERGIES/DISABILITIES/DISORDERS

Please list here

CHILD4 NAME: \_\_\_\_\_ Birthdate: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

GRADE ENTERING FOR RE (Circle please) P K 1 2 3 4 5 6 7 8 9 10 11 12

Has this student previously attended Religious Ed classes? Yes \_\_\_ No \_\_\_ Where? \_\_\_\_\_

SACRAMENTS RECEIVED - DATE / PLACE:

BAPTISM DATE/PLACE:

1ST CONFESSION DATE/PLACE

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MEDICAL INFORMATION SPECIAL CONCERNS ALLERGIES/DISABILITIES/DISORDERS

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