



Please take a moment and also fill out information on your child(ren). If you need more forms, feel free to make photocopies of this registration form.

**CHILD**

Name: \_\_\_\_\_  
(First, Middle, Last)

Goes By: \_\_\_\_\_  
(If Different)

Date of Birth: (MM/DD/YEAR) \_\_\_\_\_

Religion: \_\_\_\_\_

Gender:  Male  Female

School Attending: \_\_\_\_\_

Grade: \_\_\_\_\_

Attending Catholic Formation: Yes \_\_\_\_\_ No \_\_\_\_\_

Sacrament	YES	NO	Parish	City & State
Baptism				
Communion				
Confirmation				

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