



Faith Formation Registration 2018-2019

Student's Full Name _____ Grade _____

Parents' Names _____

Mailing Address _____

Email Address _____

Phone Number _____

Medical Conditions or other situations we should know:

Usual Sunday Mass: *(Please circle one.)*

5:00pm Saturday

7:30am Sunday

10:00am Sunday

12:00pm Sunday

Sacraments Already Received: *(Please 'x' all that apply.)*

Catholic Baptism

Confession

Holy Eucharist

Confirmation