

ST. PATRICK OFFICE OF FAITH FORMATION
NEW STUDENT FACT SHEET

NAME LAST: _____ FIRST: _____ MIDDLE: _____
BIRTHDAY: _____ PLACE OF BIRTH: _____ SEX: ____ FF-GRADE: ____

HEAD OF THE FAMILY NAME: _____

FATHER: _____ MOTHER: _____

MARITAL STATUS: _____ MAIDEN NAME: _____

RELIGION: _____ MARITAL STATUS: _____

FATHER WORK NO: _____ RELIGION: _____

FATHER CELL NO: _____ MOTHER WORK NO: _____

MOTHER CELL NO: _____

ADDRESS: _____ CITY/ST/ZIP: _____

HOME TELEPHONE: _____

E-MAIL ADDRESS: _____ SEND EMAIL? ____ YES ____ NO

CHILD LIVES WITH: _____ PLEASE SPECIFY PARENTS, FATHER, MOTHER, GUARDIAN

REGISTERED AS PARISHIONERS Y/N _____ PARISH #ID: _____

SCHOOL: _____ GRADE: _____

HAS YOUR CHILD RECEIVED THE FOLLOWING SACRAMENTS?

BAPTISM: Y/N _____ IF YES, ROMAN CATHOLIC CHURCH: ____ OTHER DENOMINATION: ____

*CERTIFICATE ON FILE: Y/N _____

RECONCILIATION: Y/N _____ MONTH AND YEAR _____

FIRST COMMUNION: Y/N _____ MONTH AND YEAR _____

CONFIRMATION: Y/N _____ MONTH AND YEAR _____

IS THERE ANYTHING WE SHOULD BE AWARE OF ABOUT THIS STUDENT? (ALLERGIES,
DIABETES, ETC.) _____

EMERGENCY CONTACT PERSON: _____ PHONE #: _____

RELATIONSHIP TO YOUR CHILD: _____

*** **BAPTISMAL CERTIFICATES MUST BE ON FILE** FOR ALL STUDENTS, ESPECIALLY THOSE
WHO ARE PREPARING TO RECEIVE THE SACRAMENTS OF RECONCILIATION,
FIRST COMMUNION AND CONFIRMATION. **MAKE SURE THE CHILD'S NAME IS CORRECT!!!**

*** MOTHER'S MAIDEN NAME IS NECESSARY FOR THE UPDATE OF ORIGINAL BAPTISMAL RECORDS.

** **FEES FOR BOOKS AND SUPPLIES: \$85.00 PER STUDENT**

ALL REGISTRATIONS MUST BE COMPLETED IN FULL BY August 1 FOR THE

2018 – 2019 FAITH FORMATION YEAR. YOU MAY MAIL THE FORMS OR DROP THEM BY

THE CHURCH OFFICE DURING THE WEEK.

OFFICE USE ONLY: FEE PAID: _____ DATE: _____

