



St. Peter the Apostle
Catholic Church
Est. June 11, 1974

5130 Rattlesnake Hammock Rd
Naples, Florida 34113
Website: <http://www.stpeternaples.com/53>
Email: theresa@stpeternaples.com
Phone: (239) 776-5489

A. ☆ New/Nuevo or ☆ Returning Student/ Estudiante de Regreso

Student's First Name _____ Last Name _____
Nombre del estudiante Apellido

Grade in Sept. 2016/Grado en sept. 2016 ____ Name of School _____ DOB Fecha de Nacimiento ____ \ ____ \ ____

Check any sacraments that student has already recieved/ Que Sacramentos ya ha recibido?

☆ Baptism /Bautismo ☆ 1st Reconciliation / 1era Confesion ☆ 1st Communion/ 1 era Comunion ☆ Confirmation/ Confirmacion

IEP in School or Special Needs: _____

Allergies/Allergias _____

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B. Parent Information/ Informacion De Los Padres

☆ Our family is registered at St. Peter the Apostle (your family must be registered using the parish registration for to enroll)
Nuestra familia esta registrada en San Pedro (su familia tiene que estar registrada antes de inscribir para las clases)

Parent/Guardian First Name _____ Last Name _____
Nombre del padre o encargado

Mailing Address/Direccion del Correo _____ Zip _____

Phone/telefono _____ Email _____

C. Youth Ministry/ Ministerio De Jóvenes

 Youth Group Grades 6-8/ Grupo De Jóvenes Grados 6-8

 Youth Group Grades 9-12/ Grupo De Jóvenes Grados 9-12



⇒ Parent Signature/ Firma del Padre _____

For Office Use: Registration Media Release Liability Waiver Registered Parishioner

Date Completed _____ Data Entered by _____

T. Barbale Form updated 5/12/2016