

New student /family enrollment

This form is for children and or families entering our Program for the first year of Religious Education at Blessed Trinity.

Childs Name FIRST and Last	Sex M/F	Date of Birth	Regular School Grade this year	School Attending	Name of Parish and city of Childs Baptism	1st Eucharist Yes/No	1st Recon Yes/No

For additional children please use the 2nd page or backside of this form.

***** If the above-named child(ren) has siblings in the program you do not need to complete the remaining portion.

Name and city of the Parish you belong to.	
Mother's first and last name.	Fathers first and last name.
Mothers' religion	Fathers Religion
Mother's address	Fathers address if different.

Email is our preferred method of sharing pertinent information with you. Please list any email address you want us to send information to.

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There may be times when we need to call or text you. Please list the number(s) you want us to use.

1 st	
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Emergency contact if parent cannot be reached.

Name	Phone #	Relationship
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