

# St. Catherine of Alexandria Family Catechesis Registration - 2020

Parents/Guardians Full Name/s: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Family Email address: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

Check the box of the Sacrament the child has received:

Baptism

1<sup>st</sup> Reconciliation

1<sup>st</sup> Communion

Parish Location of Baptism: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

Check the box of the Sacrament the child has received:

Baptism

1<sup>st</sup> Reconciliation

1<sup>st</sup> Communion

Parish Location of Baptism: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

Check the box of the Sacrament the child has received:

Baptism

1<sup>st</sup> Reconciliation

1<sup>st</sup> Communion

Parish Location of Baptism: \_\_\_\_\_

Child's name: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_ Grade: \_\_\_\_\_

Check the box of the Sacrament the child has received:

Baptism

1<sup>st</sup> Reconciliation

1<sup>st</sup> Communion

Parish Location of Baptism: \_\_\_\_\_

Is anyone in the family missing any sacraments? If so, Please explain.

\_\_\_\_\_

Please return to church office mail slot or Sr. Maria Cordis, [library@saint-catherine.org](mailto:library@saint-catherine.org)