ST. KATHARINE DREXEL PARISH
FAMILY LIFELONG FAITH REGISTRATION 2025-2026

Please PRINT clearly and complete both sides of this form:

Family Name: _____

Primary Caregivers Mailing Address _____

City_____

Contact Information: Home Phone _____

Cell Phone: _____

Work Ph 1: _____ Work Ph 2: _____

E-Mail: _____

Best time/way to reach you? _____

Are you currently registered members of St. Katharine Drexel? [ ]Yes[ ] No

[ ] Other Parish: _____

Baptism Information (Informacion bautismal):

Do you have any children who were not baptized at any of the Beaver Dam Catholic Parishes? ____ Yes ____ No

(If yes, please attach a copy of their baptismal certificate)

Special educational or medical needs regarding your children?

-COMPLETE BOTH SIDES-

FAITH FORMATION REGISTRATION: Please list the names of your children (grades K-11) who will be attending 2025-2026

First and Middle Name (Last name if different from above)	**Grade Level and School in Fall 2025**	**Date of Birth (mm/dd/yyy)**	**Sacraments received**	**Parish of Baptism, City, State, and Approx. date of Baptism**
Mother/Madre			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [ ] Confirmation	N/A
Father/Padre			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [ ] Confirmation	N/A
Child Name/Nombre del Nino Gender (Male/Female): Genero (Masc- Fem) [ ]			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [Confirmation	
Child Name/Nombre del Nino Gender (Male/Female): Genero (Masc- Fem) [ ]			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [ ] Confirmation	
Child Name/Nombre del Nino Gender (Male/Female): Genero (Masc- Fem) [ ]			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [ ] Confirmation	
Child Name/Nombre del Nino Gender (Male/Female): Genero (Masc- Fem) [ ]			[ ] Baptism [ ] 1st Reconciliation [ ] 1st Eucharist [ ] Confirmation	

Grades K-7 will take place at Spring Street School and Church – 503 S. Spring Street. Grades 8-Adults will take place at the Parish Center, 408 S. Spring Street.

-COMPLETE BOTH SIDES -