

Sebastian Catholic Church  
Faith Formation  
Final Prep – Confirmation – Grade 9 and above  
REGISTRATION 2018 – 2019

OFFICE ONLY

Completed Reg. \_\_\_\_\_

Baptismal Cert. \_\_\_\_\_

Cash: \_\_\_\_\_ Check: \_\_\_\_\_

---

PLEASE PRINT ALL INFORMATION:

Student Name: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(#, Street) (City) (State) (Zip)

Student resides with: (Circle which apply) Father Mother Both Guardian (If guardian; please give us name and contact info if different from above.)

| <u>Sacraments Received</u> | <u>Date</u>    | <u>Name of Church, City and State</u> |
|----------------------------|----------------|---------------------------------------|
| ____ Baptism               | ____/____/____ | _____                                 |
| ____ Reconciliation        | ____/____/____ | _____                                 |
| ____ Eucharist             | ____/____/____ | _____                                 |

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ City and State of Birth: \_\_\_\_\_

Name of School currently attending? \_\_\_\_\_

Was your child involved in Faith Formation last year at St. Sebastian? \_\_\_\_ Yes \_\_\_\_ No

What grades has your child participated in Faith Formation here at St. Sebastian?

Circle all that apply: Pre-K K 1 2 3 4 5 6 7 8

Was your child involved in Faith Formation in another parish? \_\_\_\_ Yes \_\_\_\_ No

If yes, name of parish: \_\_\_\_\_ City and State: \_\_\_\_\_

We are active, registered members of St. Sebastian. Year of Reg. \_\_\_\_\_



St. Sebastian Catholic Church  
Faith Formation  
Grade 8 – First Year Prep. for Confirmation  
REGISTRATION 2018 – 2019

**OFFICE ONLY**

Completed Reg. \_\_\_\_\_

Baptismal Cert. \_\_\_\_\_

Cash: \_\_\_\_\_ Check: \_\_\_\_\_

---

**PLEASE PRINT ALL INFORMATION:**

Student Name: \_\_\_\_\_  
(First) (Middle) (Last)

Address: \_\_\_\_\_  
(#, Street) (City) (State) (Zip)

Student resides with: (Circle which apply) Father Mother Both Guardian (If guardian; please give us name and contact info if different from above.)

| <u>Sacraments Received</u> | <u>Date</u>    | <u>Name of Church, City and State</u> |
|----------------------------|----------------|---------------------------------------|
| ____ Baptism               | ____/____/____ | _____                                 |
| ____ Reconciliation        | ____/____/____ | _____                                 |
| ____ Eucharist             | ____/____/____ | _____                                 |

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ City and State of Birth: \_\_\_\_\_

Name of School currently attending? \_\_\_\_\_

Was your child involved in Faith Formation last year at St. Sebastian? \_\_\_\_ Yes \_\_\_\_ No

What grades has your child participated in Faith Formation here at St. Sebastian?

Circle all that apply: Pre-K K 1 2 3 4 5 6 7 8

Was your child involved in Faith Formation in another parish? \_\_\_\_ Yes \_\_\_\_ No

If yes, name of parish: \_\_\_\_\_ City and State: \_\_\_\_\_

We are active, registered members of St. Sebastian. Year of Reg. \_\_\_\_\_



