

St. Sebastian Catholic Church  
Faith Formation  
Final Prep – Confirmation – Grade 9 and above  
REGISTRATION 2017 – 2018

OFFICE ONLY

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

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

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

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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. \_\_\_\_\_

