

SAINT MARY ON THE HILL CCD REGISTRATION

SCHOOL YEAR: _____

CHILD'S NAME: _____ GRADE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

DATE OF BIRTH: _____ PHONE: _____ Email: _____

SACRAMENTS RECEIVED

Baptism: _____ Church of Baptism: _____ Copy provided?: _____

1st Communion: _____ Bapt Month: _____

Penance: _____

Confirmation: _____

SCHOOL: _____

FATHER'S NAME: _____ RELIGION (F): _____

MOTHER'S NAME: _____ RELIGION (M): _____

MARITAL STATUS - (M S D): _____

MAILING LABEL: _____

REGISTERED MEMBER OF SAINT MARY'S: _____

WHERE ATTENDED CCD LAST YEAR: _____

ADDITIONAL INFORMATION: _____

(Learning Conditions): _____

FOR OFFICE USE ONLY:

REGISTRATION: _____ FEE PAID: _____ CHECK#: _____ CASH: _____