



INDIVIDUAL FAITH FORMATION
REGISTRATION FORM
2020-2021

Complete Name: _____

Goes by: _____

Gender: Male Female

Date of Birth: _____

Age as of 9/1/2020: _____ Grade as of 9/1/2020: _____

School Attending 2020-2021: _____

Sacraments Received (check all that apply):

Baptism Eucharist Reconciliation (Confession)

Sacrament Preparation Needed for (check all that apply):

Baptism Eucharist Reconciliation

If child is in grade 2 or older and you would like them to prepare for reconciliation and/or Eucharist this year, please complete additional 2020-2021 Reconciliation and Eucharist Registration Form.

Health Concerns/Special Needs/Allergies/Social Issues Information

We want to be as sensitive as possible to the needs of our families and children in faith formation. Please list any health concerns, allergies, special needs/disabilities, social issues, etc. of this child.

PLEASE COMPLETE AND SIGN THE "DISCLOSURE, AUTHORIZATION AND CONSENT FOR SOCIAL MEDIA OR OTHER ELECTRONIC COMMUNICATION INVOLVING MINORS" ON THE REVERSE SIDE OF THIS FORM.

ALL INDIVIDUAL FORMS SHOULD BE RETURNED TO ST. PASCAL'S, ALONG WITH A COMPLETED FAMILY INFORMATION FORM, BY AUGUST 1, 2020.