

St. Elizabeth Registration for Children's Faith Formation (PREP)  
2020-2021

Full Name of Child \_\_\_\_\_

Birthdate of Child \_\_\_\_\_

Address \_\_\_\_\_

Phone Numbers \_\_\_\_\_, \_\_\_\_\_

E-mail addresses \_\_\_\_\_, \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

Grade in School \_\_\_\_\_ Name of School \_\_\_\_\_

