

ST. BARNABAS RELIGIOUS EDUCATION REGISTRATION FORM

202__ – 202__

FORM UPDATED: 04/12/2023

STUDENT INFORMATION (AS IT APPEARS ON BAPTISM CERTIFICATE)

1YRC – \$____ 2YRC – \$____ FF – \$____

LAST NAME: _____ FIRST NAME: _____ MIDDLE NAME: _____

GENDER: _____ DATE OF BIRTH: _____ AGE: _____

SCHOOL CHILD IS ATTENDING: _____ GRADE: _____

RECEIVED SACRAMENT OF BAPTISM: YES OR NO NAME OF CHURCH: _____ DATE: _____

RECEIVED FIRST HOLY COMMUNION: YES OR NO CITY & STATE OF CHURCH: _____

FATHER'S INFORMATION

STEP-FATHER

OTHER: _____

LAST NAME: _____ FIRST NAME: _____

OCCUPATION: _____ CELL NUMBER: _____

EMAIL: _____

MOTHER'S INFORMATION

STEP-MOTHER

OTHER: _____

MAIDEN NAME: _____ FIRST NAME: _____

OCCUPATION: _____ CELL NUMBER: _____

EMAIL: _____

