

Sacred Heart Parish Faith Formation Registration Form

(one registration form per child, please!)

2009 Fees: First child \$35.00—more than one child \$50.00

Family Name: _____

Home Phone: _____

Address: _____

E-mail address: _____

Permission to take photos: _____ YES _____ NO

Emergency contact info: _____

Child's last name (if different): _____

First Name: _____

Birth Date: _____ **Gender:** _____ **Grade:** _____

Date of Baptism: _____ **Church:** _____

First Reconciliation Date: _____ **First Eucharist Date:** _____

Special needs, medical and or physical such as allergies, learning problems, social problems: _____

Father's full name: _____ **Religion:** _____

Mother's full name: _____ **Religion:** _____

Parents signature: _____

Date: _____

Office use only:

Fee paid: _____ **Date:** _____