

Sacred Heart Parish - Faith Formation Registration Form

(Please print clearly)

STUDENT'S FIRST NAME _____ MIDDLE: _____ LAST: _____

DATE OF BIRTH _____ (MM/DD/YY) Place _____ Male/ Female

GRADE IN SEPTEMBER 2026 _____ School _____

WHERE WAS CHILD BAPTIZED: _____

(Church, City and State)

New students must provide a baptismal certificate, if not baptized at Sacred Heart Church.

SPECIAL HEALTH NEEDS: ALLERGIES _____ ANY MEDICAL CONDITION WE SHOULD KNOW ABOUT _____

SPECIAL LEARNING NEEDS _____

FATHER'S FIRST NAME _____ MIDDLE: _____ LAST: _____

HOME PHONE : _____ CELL PHONE.: _____

FATHER'S ADDRESS _____

***FATHER'S EMAIL ADDRESS _____

MOTHER'S FIRST NAME _____ MIDDLE: _____ LAST: _____

MAIDEN NAME: _____ HOME PHONE (if different): _____

MOTHER'S ADDRESS (if different) _____

***MOTHER'S EMAIL ADDRESS _____

MOTHER'S CELL PHONE _____

WITH WHOM DOES CHILD RESIDE? Mother ___ Father ___ BOTH ___ OTHER _____
Please note any special circumstances we should know about and additional contact information we should have:

PARISH WHERE PARENTS ARE REGISTERED _____

PARENT SIGNATURE _____

** EMERGENCY CONTACT NAME (other than parents/guardian): _____

PHONE NUMBER(S): _____ RELATIONSHIP: _____

Please See Other side

CAN YOU HELP WITH OUR PROGRAM?

Catechist (Teacher – grade?) _____

Catechist (Aide – grade?) _____

Substitute Catechist (grade?) _____

Elem. Dismissal Helper _____

Weekly Office Help _____

Special projects help _____

Additional children to be enrolled:

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ABOUT _____

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