



CATHOLIC FAITH FORMATION

New Family Registration for Religious Education Classes 2017/2018

Family Information

Child lives with Both Parents Father Mother Other Guardian
 Address _____ City _____ Zip _____

Parent/Guardian living in household

Legal Name of Parent/Custodial Guardian - Head of Household (HOH)
 HOH 1 _____
 Date of Birth _____ Cell Phone _____
 E-mail _____

Legal Name of Parent/Custodial Guardian - Head of Household (HOH)
 HOH 2 _____
 Date of Birth _____ Cell Phone _____
 E-mail _____

Marital Status of parents Married: Catholic Church Civil Marriage
 Date _____ Church/City _____
 would like information on how to receive the sacrament of Holy Matrimony
 or Single Divorced Separated Widowed

Communication Preference Text E-Mail Phone
 Company you have phone service with _____
 Use E-mail above or this E-mail address _____
 Use phone number above or this phone number _____

Sacramental Information Received

HOH 1 Baptism Holy Communion Confirmation Holy Matrimony
 HOH 2 Baptism Holy Communion Confirmation Holy Matrimony

Parish Registration

Are you registered at:
 Saint Mary Cathedral
 San Francisco Javier
 San José
 None
 Other Catholic Parish

 Name of Parish

Education

My child(ren) attend:
 Catholic/Private School
 Public School

 Name of School

Emergency Contact

Other than parent
 Name _____
 Phone _____

 Relation to Student

Register Child(ren)

Legal First Name	Legal Last Name	Sex	Grade	Sacraments Received
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptism <input type="checkbox"/> Holy Communion <input type="checkbox"/> Confirmation
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptism <input type="checkbox"/> Holy Communion <input type="checkbox"/> Confirmation
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptism <input type="checkbox"/> Holy Communion <input type="checkbox"/> Confirmation
		<input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> Baptism <input type="checkbox"/> Holy Communion <input type="checkbox"/> Confirmation

I, the parent/legal guardian of the above listed children do hereby give permission for photographs to be taken of my child who will attend Saint Mary Cathedral Faith Formation. I also give the CFF office permission to use my child's photograph in publications; newsletters, brochures, websites, news reports and promotion of this and/or similar kinds of events. These images will not be manipulated or used in any public venue, besides that stated, without further permission.

Parent/Guardian Signature: _____ **Date:** _____