

**St. Charles Garnier Parish
SACRAMENT FORM
2017-18**

Name of Father (First & Last) _____

Name of Mother (First & Last) _____

Mother's Maiden Name _____

Mailing Address _____

Email Address(s) _____

- *Note E-mail Addresses are required as this is our primary form of communication*

Phone (H) _____ Phone (W) _____

Health Issues (i.e. allergies, special needs) _____

Which Church are you registered at/do you presently attend? _____

Offertory Envelope #: _____

Which Sacrament(s):

Student Name	M/F	Current School	Date of Birth (M/D/Y)
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1. _____

2. _____

CONFIRMATION NAME: _____

Fee \$60 per child to cover cost of all materials

Baptized at: (Church, city, month, day, year)

** We require a copy of their Baptismal Certificate attached to this registration form if you did not submit already - for the Bishop's records.*

1. If your child/ren have missed any Sacraments or Grades of Religious Education we need to know which ones and for what reasons.
2. Any other helpful info we should know about your child/family

PLEASE WRITE ON THE BACK IF NEEDED

DATE: _____ SIGNATURE: _____