

# St. Benedict's Chapel

## Catechism Registration Form (for 2010-11)

PLEASE PRINT ALL INFORMATION

FAMILY NAME \_\_\_\_\_ Registered in Chapel: Yes: \_\_\_\_\_ No: \_\_\_\_\_

If your child is receiving a sacrament for the first time this year, you must be registered in the Chapel

STREET \_\_\_\_\_ Home Phone \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_ Work PHONE \_\_\_\_\_ Cell: \_\_\_\_\_

Email address \_\_\_\_\_

Family Marital Status: \_\_\_\_\_

FATHER

MOTHER

Last Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Title (Mr., Dr, Rank, etc.): \_\_\_\_\_

Title (Mrs., Ms, Dr, Rank, etc.): \_\_\_\_\_

Where were your children enrolled in Religious Education Classes 2009-2010? \_\_\_\_\_

Were your children enrolled in a Catholic School? Yes \_\_\_\_\_ No \_\_\_\_\_

Please state the name of the parish and city where located: \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_  
BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
BAPTIZED? yes \_\_\_\_\_ no \_\_\_\_\_  
Where? \_\_\_\_\_

SACRAMENTS RECEIVED  
BAPTISIM: yes \_\_\_\_\_ no \_\_\_\_\_  
PENANCE: yes \_\_\_\_\_ no \_\_\_\_\_  
EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_  
BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
BAPTIZED? yes \_\_\_\_\_ no \_\_\_\_\_  
Where? \_\_\_\_\_

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PENANCE: yes \_\_\_\_\_ no \_\_\_\_\_  
EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_  
BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
BAPTIZED? yes \_\_\_\_\_ no \_\_\_\_\_  
Where? \_\_\_\_\_

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BAPTISIM: yes \_\_\_\_\_ no \_\_\_\_\_  
PENANCE: yes \_\_\_\_\_ no \_\_\_\_\_  
EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_  
BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
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EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

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BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
BAPTIZED? yes \_\_\_\_\_ no \_\_\_\_\_  
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PENANCE: yes \_\_\_\_\_ no \_\_\_\_\_  
EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

CHILD'S FULL NAME \_\_\_\_\_  
BIRTH DATE MM/DD/YY \_\_\_\_\_ MALE \_\_\_ FEMALE \_\_\_  
SCHOOL \_\_\_\_\_ GRADE Entering \_\_\_\_\_  
BAPTIZED? yes \_\_\_\_\_ no \_\_\_\_\_  
Where? \_\_\_\_\_

SACRAMENTS RECEIVED  
BAPTISIM: yes \_\_\_\_\_ no \_\_\_\_\_  
PENANCE: yes \_\_\_\_\_ no \_\_\_\_\_  
EUCHARIST: yes \_\_\_\_\_ no \_\_\_\_\_  
CONFIRMATION: yes \_\_\_\_\_ no \_\_\_\_\_

(OVER)

# St. Benedict's Chapel

## Catechism Registration Form (for 2010-11)

CHILD'S FULL NAME _____ BIRTH DATE MM/DD/YY _____ MALE ___ FEMALE ___ SCHOOL _____ GRADE Entering _____ BAPTIZED? yes ___ no ___ Where? _____	SACRAMENTS RECEIVED BAPTISIM: yes ___ no ___ PENANCE: yes ___ no ___ EUCHARIST: yes ___ no ___ CONFIRMATION: yes ___ no ___
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CHILD'S FULL NAME _____ BIRTH DATE MM/DD/YY _____ MALE ___ FEMALE ___ SCHOOL _____ GRADE Entering _____ BAPTIZED? yes ___ no ___ Where? _____	SACRAMENTS RECEIVED BAPTISIM: yes ___ no ___ PENANCE: yes ___ no ___ EUCHARIST: yes ___ no ___ CONFIRMATION: yes ___ no ___
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CHILD'S FULL NAME _____ BIRTH DATE MM/DD/YY _____ MALE ___ FEMALE ___ SCHOOL _____ GRADE Entering _____ BAPTIZED? yes ___ no ___ Where? _____	SACRAMENTS RECEIVED BAPTISIM: yes ___ no ___ PENANCE: yes ___ no ___ EUCHARIST: yes ___ no ___ CONFIRMATION: yes ___ no ___
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Are there any special needs / concerns that you would like us to know about (any of) your child(ren)?  
 (i.e. physical /learning disability)

Please indicate in which way you might help by checking the space below. Thank you.

Catechist \_\_\_\_\_ Assistant Classroom Helper \_\_\_\_\_ Substitute \_\_\_\_\_

Date of Virtus Training: \_\_\_\_\_