

# Clallam Catholic Parishes

## Faith Formation Registration Form

Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_

Parish of Registration: \_\_\_\_\_

Sacraments Received:

\_\_\_\_\_ **Baptism**

Name/City of Parish \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_ **First Holy Communion**

Name/City of Parish \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_ **Confirmation**

Name/City of Parish \_\_\_\_\_ Year \_\_\_\_\_

**Father's Legal Name** \_\_\_\_\_

Home address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Religion \_\_\_\_\_

**Mother's Legal Name** \_\_\_\_\_

Mother's maiden name \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Religion \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Parent Signature \_\_\_\_\_

