

STUDENT APPLICATION

To register multiple students in the same household, attach additional copies of [this page](#)

To register a new student, you must provide a copy of their *Baptismal Certificate*

(To obtain a copy of the certificate, contact the parish where the student was baptized)

Student Information:

_____ / _____ / _____
Last Name First Name Date of Birth

_____ Age on Sept. 1, 2023: _____
Name of School Grade Level

Has this student been **Baptized Catholic**? Yes No _____
If Yes, Name of Church

Has this student received **First Communion**? Yes No _____
If Yes, Name of Church

Please indicate the class requested:

Tuesday Classes (6:00pm-7:15pm)

- First Communion I (Grades 1-2)
- First Communion II (Grades 1-2)
- First Communion I (Grades 3-5)
- First Communion II (Grades 3-5)
- First Communion (Special Needs)
- Continuing Faith Formation (Grades 3-5)
- Kindergarten Faith Formation

Wednesday Classes (6:00pm-7:30pm)

- First Communion I (Grades 6-8)
- First Communion II (Grades 6-8)
- Confirmation I
- Confirmation II

List any medical or special needs information that we need to know: _____

List anyone who is not allowed to have access to your child: _____

Check if you do not want the child's photograph published (*in parish bulletin/website, etc*)

Office Use Only: _____