

**Sacred Heart/St. Bernard Parishes**  
**Student Registration for Faith Formation**  
**Grades K-6      2018-2019**  
**(Please fill out one form per child – Thanks!)**

Student's Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

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

Age: \_\_\_\_\_ Current Grade Level: \_\_\_\_\_

Gender: (M/F): \_\_\_\_\_ English as a Second Language? Yes or No

Baptism: Year received \_\_\_\_\_ City/Parish \_\_\_\_\_

1<sup>st</sup> Communion: Year received \_\_\_\_\_ City/Parish \_\_\_\_\_

Registered Parish: St. Bernard's \_\_\_\_\_ Sacred Heart \_\_\_\_\_

**Special Needs or Allergies:** \_\_\_\_\_

**Parent Information:**

Mother: \_\_\_\_\_ Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mother's Cell#: \_\_\_\_\_ Home#: \_\_\_\_\_

Father: \_\_\_\_\_ Address: \_\_\_\_\_

City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

Father's Cell#: \_\_\_\_\_ Home#: \_\_\_\_\_

**\*\*Email Address:** \_\_\_\_\_

Registration Fee: First Child \$60.00 \_\_\_\_\_ 2 Children \$75.00 \_\_\_\_\_  
3 or more children \$100.00 \_\_\_\_\_

\*Please let us know if there are financial difficulties and aid may be available. Contact Melanie Broswick  
[childrensministry@saintbernards.org](mailto:childrensministry@saintbernards.org) #(707) 442-6466 ext.1103

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Payment Check/Cash: \_\_\_\_\_ Amount: \_\_\_\_\_