

Faith Formation Religious Education/Sacraments STUDENT SACRAMENT RECORD FORM

1807 Bedford St, Rome, NY 13440

(rev. 8-2017)

Please print all information clearly.		
Child's Name: (Last Name)	(First)	(Middle)
Family Last Name (if different than child):		
Student Date of Birth:	Place (City) of Birth:	Gender:
Father's Name:	Religion:	
Mother's Maiden Name:	Religion:	
Please complete if applicable:		
Legal Guardian Name:	Religion:	
Step-Parent Name:	R	eligion:
Has student attended religious education	classes in the past? If	yes, where?
Check all Sacraments your child has rece	eived and fill in date, church and Name of Church	l location of the church: Location: <u>City, State</u>
□ Baptism		
☐ Penance		
☐ Eucharist		
□ Confirmation		
Please attach a copy of your child's Bapt child was baptized at St. Paul's, we have If your child has not been baptized, pleas	tismal certificate if your child was the baptismal information on file se speak to Julianne or Father K	s not baptized at St. Paul's. (If your e.)
Please return this form to St. Paul's Faith	1 Formation with your Family Re	gistration Form or by mail to:

Julianne Stokes, DRE St. Paul's Faith Formation 1807 Bedford St. Rome, NY 13440