San Secondo d'Asti Roman Catholic Church Office of Catechetical Ministry Registration Year

Family Last Name:			Date:						
Parent Info	rmation								
Father's Full Name Father's Cell#								-	
Mother's Full NameMaiden Name								<u>.</u>	
Mother's Cell#									
Address		City/ Z	<u>'</u> ip						
Home Phone #				Email					
1st Child's Full Name			DOB	/	/	_Age	_ Grade in SEF	T' T'	
Baptized in a Catholic Church? Yes / No Year FHC Received ? Yes / No Year									
(Sacrament certificates required if you are a new Student)									
Years of Religious Education? Special Needs? (Medical , Emotional, Behavioral)									

HOMESC	FHC1	FHC2	OFHC1	OFHC2	3RD	5TH	6TH	7TH	8TH
Sacrament	Certificates	on File: Bapt	tism	FHC					
2nd Child's Full Name DOB/ Age Grade in SEPT									т
Baptized in a Catholic Church? Yes / No Year FHC Received ? Yes / No Year									
(Sacrament certificates required if you are a new Student)									
Years of Religious Education? Special Needs? (Medical , Emotional, Behavioral)									

HOMESC	FHC1	FHC2	OFHC1	OFHC2	3RD	5TH	6ТН	7TH	8TH
Sacrament Certificates on File: Baptism FHC									
Do you attend Mass weekly? Yes/No. Name of Parish family attends									
Would you be interested in volunteering as a Catechist/Aide? Yes/No									

Amount Due:			Aı	mount Paid:		Balance Due:			
Cash:			Check #	:		Reminder Notice:			