Saint Victoria Catholic Church



2019-2020 Year

Parent’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address

Home Number

Cell Number

Email

Date of Birth

Age

School Grade

School Name

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Sacraments Received; |  | | | |
| Baptism | Yes [ ] No [ ] | First Reconciliation | Yes [ ] | No [ ] |
| First Communion | Yes [ ] No [ ] | Confirmation | Yes [ ] | No [ ] |

As a parent of a child in our Religious Education program, I am willing to help as a;

Teacher [ ] Substitute Teacher [ ] Teen / Youth Group [ ] Bulletin Board Artist [ ]

An activity I would be interested in assisting with is

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: