

### Family Sacramental Information

This form must be completed and turned in to the school office: **Attn: Mary Anne Shaw or Darlene Williams** prior to the start of the school year. This information is vital to our ability to instruct your child and prepare for sacraments.

Husband's Name: \_\_\_\_\_

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

Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

First Communion YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

Are you: SINGLE MARRIED DIVORCED SEPERATED WIDOWED

Church/City of Marriage: \_\_\_\_\_

By Priest: YES NO

NOTES: \_\_\_\_\_

Wife's Name: \_\_\_\_\_

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

Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

First Communion YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

Are you: SINGLE MARRIED DIVORCED SEPERATED WIDOWED

Church/City of Marriage: \_\_\_\_\_

By Priest: YES NO

NOTES: \_\_\_\_\_

Child's Name: \_\_\_\_\_

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

Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

First Communion YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

Confirmation YES NO Where: \_\_\_\_\_ Date: \_\_\_\_\_

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Child's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized            YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
First Communion   YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
Confirmation        YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized            YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
First Communion   YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
Confirmation        YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized            YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
First Communion   YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
Confirmation        YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_  
Religion: \_\_\_\_\_ Name of Parish: \_\_\_\_\_

Baptized            YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
First Communion   YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_  
Confirmation        YES    NO    Where: \_\_\_\_\_ Date: \_\_\_\_\_