St. Paul's PARISH SUMMERSIDE · PEI

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Summerside, PE C1N 1N4 Canada
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Student Information:

Name:_____ Gender: M • F •

Date of Birth (MM/DD/YY): _____ Grade this school year: _____

Does your child have any allergies, special needs or other considerations? _____
_____
_____

Is this child Baptized? Y • N •
If yes, place of Baptism (City/country): _____

Other Sacraments already received:
Reconciliation • First Communion • Confirmation • None •

Are you seeking to have your child receive a Sacrament this year? Yes • No •

If Yes, please indicate which Sacrament:

- First Communion
- First Reconciliation
- Confirmation

Note: If your child will be preparing to receive any sacraments this year, you are required to submit a copy of their baptismal certificate unless they were baptized at St. Paul's.

*Forms for additional children on back of page

Office Use Only: SP •

Family Information:

Mother's/guardian Name: _____

Father's/guardian Name: _____

Preferred Email: _____

Phone Number: _____ Cell • Home • Other•

Alternate Phone Number: _____ Cell • Home • Other•

Street Address: _____

City: _____ Postal Code: _____

Do you have a Facebook account? Yes • No •

Signature for Consent: I hereby consent to allow any photographs that are taken during the course of St. Paul's Faith Formation Program in which my child appears, to be used by the Parish in promotional material. I understand that I am able to change this consent at any time by providing written notice to the Main Office.

- I agree
- I Disagree

Parent/Guardian Signature: _____ Date: _____

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