



Faith Formation Student Registration Form

2025-2026

☐ We are new to St. Leo Parish

Family Information	
Mother's Name:	Cell Phone:
Father's Name:	Cell Phone:
Primary Address:	Primary Language Spoken in Home:
	Email:
In case of Emergency & parents cannot be reached please contact:	
Relationship _____ Phone #: _____	
Student Information:	
Child's Name:	Date of Birth:
	Grade in School:
Sacraments Received: ____ Baptism ____ Reconciliation	Primary Language:
____ First Eucharist ____ Confirmation	
☐ Check this box if the Sacraments were received in a parish <u>other</u> than St. Leo	Other: (special needs, allergies, dismissal, etc)
Child's Name:	Date of Birth:
	Grade in School:
Sacraments Received: ____ Baptism ____ Reconciliation	Primary Language:
____ First Eucharist ____ Confirmation	
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