

CHILD 2

Full Name:			Birth Date & City:
First	Middle	Last	
Date of Baptism:	at:	City, State:	
Date of First Reconciliation:	at:	Grade in school as of Sept. 2026:	
Date of First Holy Communion:	at:	Name of School and City:	
Date of Confirmation:	at:		
Grades of Religious Ed. completed at St. Joseph or OLPH: 1 2 3 4 5 6 7 8			First year of RE at St. Joseph or OLPH was/is:
At other parish(es): 1 2 3 4 5 6 7 8		Name and Location of Parish(es):	
Special Needs/Allergies:			

CHILD 3

Full Name:			Birth Date & City:
First	Middle	Last	
Date of Baptism:	at:	City, State:	
Date of First Reconciliation:	at:	Grade in school as of Sept. 2026:	
Date of First Holy Communion:	at:	Name of School and City:	
Date of Confirmation:	at:		
Grades of Religious Ed. completed at St. Joseph or OLPH: 1 2 3 4 5 6 7 8			First year of RE at St. Joseph or OLPH was/is:
At other parish(es): 1 2 3 4 5 6 7 8		Name and Location of Parish(es):	
Special Needs/Allergies:			

CHILD 4

Full Name:			Birth Date & City:
First	Middle	Last	
Date of Baptism:	at:	City, State:	
Date of First Reconciliation:	at:	Grade in school as of Sept. 2026:	
Date of First Holy Communion:	At:	Name of School and City:	
Date of Confirmation:	at:		
Grades of Religious Ed. completed at St. Joseph or OLPH: 1 2 3 4 5 6 7 8			First year of RE at St. Joseph or OLPH was/is:
At other parish(es): 1 2 3 4 5 6 7 8		Name and Location of Parish(es):	
Special Needs/Allergies:			

For more than four children, please request an additional form and attach it to this one.