St. Dominic Parish School of Religion
Registration Form 2014-2015

Name of Child _____

    Date of Birth _____
    Grade _____
    School Attending _____

Parents' or Guardians' Names _____

    Address _____
    Phone _____
    Email _____

Sacramental Information:
    If new to the program this year or
    Receiving Confirmation or First Communion this school
    year.)

    Baptism/Date _____
    Parish _____

     Mother's MAIDEN Name _____
     Father's Name _____
    Eucharist? _____
    Confirmation? _____
If in grades 2 or 7, please attach a copy of Baptismal
information if not baptized in St. Dominic Parish

Special Needs?