



Blessed Sacrament Cathedral



Sacramental Formation Registration



FAMILY'S LAST NAME: _____

Father's Name: _____

Religion: _____

Mother's Name: _____

Religion: _____

Mother's Maiden Name: _____

The child lives with: _____ both parents _____ mother _____ father

Email Address: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

Cell Phone Number: _____

Are you registered at Blessed Sacrament Cathedral? Yes _____ No _____

Child's Name: _____ DOB: _____ Grade: _____

Date of Baptism _____ Church of Baptism: _____

Address Church of Baptism _____

City _____ State _____ Zip _____

No matter where your child was baptized (unless at Blessed Sacrament Cathedral Parish) a copy of their Baptismal Certificate **must accompany this form**. All those preparing for the Sacraments are required to pay a \$50.00 registration fee.

- Enrolled in _____ Sunday Faith Formation Program
- _____ Home Based Faith Formation Program
- _____ Aquinas Academy

For Blessed Sacrament Cathedral Parish Office Use Only:
 _____ Baptismal information _____ certificate verified by _____ date _____
 _____ Information recorded in Blessed Sacrament Cathedral Communion Registry
 _____ Church of Baptism notified of First Communion