

**2016-2017**

**St. Patrick's Faith Formation Registration Form**

**Student Information**

LAST NAME:	FIRST NAME:
DATE OF BIRTH:	CURRENT GRADE:
PLEASE LIST ANY SACRAMENTS YOUR CHILD IS MISSING (Baptism, 1st Eucharist, etc.):	SCHOOL CURRENTLY ATTENDING:
STUDENT LIVES WITH (PLEASE CIRCLE ONE): BOTH PARENTS   MOTHER   FATHER   GUARDIAN	GRADES CHILD HAS COMPLETED IN FAITH FORMATION: 1   2   3   4   5   6

**Parent/Guardian Information**

FATHER'S LAST NAME:	FATHER'S FIRST NAME:
MOTHER'S LAST NAME:	MOTHER'S FIRST NAME:
ADDRESS:	CITY:
STATE:	ZIP CODE:
PHONE: (     )	EMAIL:

**Sibling Information**

NAME:	GRADE:
NAME:	GRADE:

ST. PATRICK'S CHURCH  
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