

Saint Paul Parish
820 Carbon Road
Greensburg, PA 15601
724-834-6880

Be My Disciple Faith Formation Registration

2018 / 2019

Family Last Name _____

Address _____ **City** _____ **Zip** _____

Home Phone _____ **Cell** _____ **Email** _____

Registered at St. Paul Parish? Yes ___ **No** ___

If no, Home Parish _____

Father/Guardian's Name _____

Religious Affiliation _____

Address _____ **City** _____ **Zip** _____

Home Phone _____ **Cell** _____ **Email** _____

Mother/Guardian's Name (including maiden name) _____

Religious Affiliation _____

Address _____ **City** _____ **Zip** _____

Home Phone _____ **Cell** _____ **Email** _____

Emergency contact if you cannot be reached

Name _____ **Phone** _____ **Relationship** _____

Child's Name _____ **Age** _____

Grade (beginning Sept. 2018) _____

School _____

Birthday _____ Baptism _____ Eucharist _____ Confirmation _____

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Please check Sacraments that have been received

Allergies/Health issues _____

Child's Name _____ Age _____

School _____

Grade (beginning Sept. 2018) _____

Birthday _____ Baptism _____ Eucharist _____ Confirmation _____

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Allergies/Health issues _____

Child's Name _____ Age _____

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