



FIRST COMMUNION/RECONCILIATION REGISTRATION FORM

TO COMPLETE REGISTRATION PLEASE ATTACH THE FOLLOWING

- 1) Year 1 or Year 2 (**circle one**)
- 2) Copy of Baptismal Certificate
- 3) Registration fee: \$60/student/year
- 4) School: _____ Grade: _____

CHILD'S INFORMATION

Name: _____
First Middle Last

Date of Birth: _____ Place of Birth: _____

Date of Baptism: _____ Church Name: _____

Church of Baptism address: _____
City, State, Zip

PARENTS INFORMATION

Father's Name: _____
First Middle Last

Mother's Name: _____
First Middle Last (Maiden Name)

Address: _____

City: _____ Zip: _____

Cell Phone(s): _____

Language(s): _____

Email Addresses: _____

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