

# Saint John Paul II Parish Sacrament Registration

## FIRST HOLY COMMUNION

### 2019-20 School Year

*To register your child for St. John Paul II Sacrament Preparation please fill out the form below and return to the Parish Office (16680 S Lind Rd., Olathe) or via email at [curtiskeddy@jp2kc.org](mailto:curtiskeddy@jp2kc.org) by **August 11<sup>th</sup>, 2019.***

PLEASE PRINT CLEARLY			
Father's Name:		Religion:	
Home Phone:		Cell Phone:	
Mother's Name:		Religion:	
Home Phone:		Cell Phone:	
Mother's Maiden Name:		Marital Status:    S    M    D    Sep    W	
Primary Address:			
Email Address:		Children Lives with:    Both    Mother    Father    Other	
Family Registered in Parish?    Yes    No <i>(If no, please complete a parish registration form)</i>			
Are you willing to host a Small Group Parent Session in your home once a month?    Yes    No			
<b>FIRST CHILD</b>			
First Name:	Middle:	Last:	
Gender:    M    F	Date of Birth:	Place of Birth:	
Grade:	School:		
Learning Needs/Allergies:			
Baptized?    Yes    No	Baptized Catholic?    Yes    No		
Church of Baptism:	City/State:	Date of Baptism:	
<b>***You will need to provide a copy of your child's Baptismal Certificate***</b>			
<b>SECOND CHILD</b> (if you have additional children to register, please fill out Child Portion on another form and attach)			
First Name:	Middle:	Last:	
Gender:    M    F	Date of Birth:	Place of Birth:	
Grade:	School:		
Learning Needs/Allergies:			
Baptized?    Yes    No	Baptized Catholic?    Yes    No		
Church of Baptism:	City/State:	Date of Baptism:	
<b>EMERGENCY CONTACT INFORMATION</b>			
Name:			
Relation to Child:		Phone:	