



ST. FIDELI PARISH
 OFFICE FOR RELIGIOUS EDUCATION
 724 -482 - 2362 stfideliscdd@gmail.com

Jesus said... "I am the bread of life; whoever comes to me will never hunger,
 and whoever believes in me will never thirst." John 6:35

PERMANENT RECORD FORM (One per child)

Child's Name: _____ M _____ F _____

2010-2011 Grade: _____

Is the family registered as parishioners of St. Fidelis Parish? Yes _____ No _____

Father's First & Last Name: _____ Father's Religion: _____

Mother's Name: _____ Mother's Religion: _____

Mother's Maiden Name: _____

Marital Status: Married _____ Divorced _____ Single _____ Widowed _____

With whom does the student live and which parent must be contacted for illness or events?

Address: _____ City: _____ ST: _____ Zip: _____

Phone: _____ Work Phone: _____ Cell Phone: _____

Is the address the same for both Mother and Father? Yes _____ No _____

Date of Birth: ____/____/____ City & State of Birth: _____

Date of Baptism: ____/____/____ Church of Baptism: _____

Include a copy of the baptismal certificate if the child was not baptized at St. Fidelis.

Baptismal Church and Church Address (Include City, State and Zip)

Date of First Communion: ____/____/____

Church of First Communion: _____

Please describe any speech or learning disabilities: _____

Allergies?: _____

Physical limitations?: _____

In case of emergency, please contact (name and phone number): _____
