

St. Mary's Catholic Church
Somerset, Texas
REGISTRATION: Sacramental classes only

Member Information:

Family Last Name: _____ **Email address:** _____

Address: _____
Street City, State, Zip Code

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

Cell Phone# _____

Mother's Name: _____ **Religion:** _____
First Name Last Name

Cell Phone# _____

Emergency Contact Information (Other than parent) Name: _____

Cell #: _____ **Relationship:** _____

Other than parent, who is authorized to pick up your child?

Name: _____ **Relationship:** _____

Student Information

Last name: _____ First name: _____

Preferred Name: _____

Birth date: _____ Grade: 2020-2021 _____ Name of School: _____

Sacramental information:

Baptized: Yes No Parish where Baptized: _____

Cert provided: Yes No If not baptized we will need the original Birth Certificate, with seal, in preparation for RCIC

Eucharist: Yes No Parish where sacrament received: _____

Confirmation: Yes No

Last name: _____ First name: _____

Preferred Name: _____

Birth date: _____ Grade: 2020-2021 _____ Name of School: _____

Sacramental information:

Baptized: Yes No Parish where Baptized: _____

Cert provided: Yes No If not baptized we will need the original Birth Certificate, with seal, in preparation for RCIC

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Eucharist: Yes No

Parish where sacrament received: _____

Confirmation: Yes No