

## Fulton/Pulaski Pastorate

## 2023-2024 Religious Education Registration Form

Date:

Family Last Name:			Both	Both Parents Catholic YN		
Mailing Address:						
Father's Name:						
Phone:						
Sacraments Received:	Baptism	Eucharist	Penance	Confirmation	Catholic Y or N	
Mother's Name:	Maiden Name:					
Phone:						
Sacraments Received: Baptis	sm Euch	narist Pena	ance Conf	firmation Catho	olic Y or N	
Custodial Parent, if different	from above:					
Phone:		Email:				
Sacraments Received:						
Emergency Contact:		Phone:				
*******	<*********	******	*****	******	******	
Child's Name:		Birth	ndate:	Sex:	Grade:	
Sacrament & Date:	Baptism	Eu	ıcharist			
Confirmation	Catholic Yes or No (Please Circle)					
			·			
Special Needs: medical, lear	ning disabiliti	es, physical disa	abilities:			

**Note**: If any of your children were baptized outside of the parish, and you have not already supplied us with a copy of each child's baptism record, you will need to supply a copy for our files.