

Saint Anthony Church
2009-2010 C.R.E.A.T.E. Registration Form

Family Name: _____ E-Mail: _____
Address: _____ Zip: _____
Home Telephone: _____ Cell Phone: _____
Father's Name: _____ Religion: _____
Mother's Name: _____ Religion: _____

Please list children you would like enrolled in the program and sacraments they have already received (Baptism, 1st Penance, 1st Communion): ****You do not have to list sacraments if previously enrolled in program.**

Grade in

1. Child: _____ DOB: _____ September: _____ School: _____

Sacraments (include place and date):

Grade in

2. Child: _____ DOB: _____ September: _____ School: _____

Sacraments (include place and date):

Grade in

3. Child: _____ DOB: _____ September: _____ School: _____

Sacraments (include place and date):

Grade in

4. Child: _____ DOB: _____ September: _____ School: _____

Sacraments (include place and date):

If you have more children, God Bless You...and continue on back.