



ST. JOHN XXIII  
CATHOLIC CHURCH

# Sacramental Registration Form (Child)

Today's Date \_\_\_\_\_

## Child's Information:

Child's Full Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ City and State of Birth \_\_\_\_\_

Date of Baptism \_\_\_\_\_

Place of Baptism (Church Name/Address/City/State/Country)

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## Household Information:

Father's Full Name \_\_\_\_\_

Mother's Full Name (first, middle, maiden) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

What Sacraments does your child need? (Check all that apply)

1st Confession       Confirmation       1st Communion

Sponsor's Full Name \_\_\_\_\_

Confirmation Saint Name (determined after Saint Reports) \_\_\_\_\_

***A copy of your child's Baptism Certificate needs to be submitted with this form.***