Faith Formation and Sacramental Preparation Sign-Up Area for Student

Please print legibly the first and last name for each student. Answer all questions completely. For childrenpreparing for sacraments, please specify which sacrament(s) they have and which sacrament(s) they are requesting. ***Families attending faith formation must be registered in the church and attend Mass on a weekly basis.***

Last Name Head of Household _____ Today's Date _____

Complete Separate Page for Each Child Being Enrolled

_____ Date of Birth:_____ Grade: _____ Male ☐ Female ☐
Child's First and Last Name

Did child attend all classes last year (2025-26)? Yes ☐ No ☐ Did child & parents attend Mass? Yes ☐ No ☐

Is this child attending St. Andrew Catholic School? Yes ☐ No ☐ If yes, since when? _____

Sacraments Student Received

Baptism? Yes ☐ No ☐ Where? _____ Date _____
Name of Church, City, State

First Communion? Yes ☐ No ☐ Where? _____ Date _____
Name of Church, City, State

Confirmation? Yes ☐ No ☐ Where? _____ Date _____
Name of Church, City, State

Any Medical Condition/Allergies/Dietary Needs of student: _____

Request for Sacraments

Are you requesting this child be prepared to celebrate a Sacrament? Yes ☐ No ☐

IF YES, please check the sacraments that you are requesting for the student being registered. The following is the order in which sacraments are celebrated:

☐ **Baptism**—must call the office for additional paperwork and information.

☐ **First Communion (including First Reconciliation)**—must submit child's Baptism certificate.

☐ **Confirmation**—must submit Baptism and First Communion certificates.

PLEASE DO NOT WRITE IN THIS SPACE

Office Use ONLY:

_____ _____
Name of Head of Household *Name of Spouse of Head of Household*

Child's Sacramental Preparation Level: _____ *Attending FF continuously since:* _____