

**OFFICE OF CATECHESIS
ST. JOHN NEUMANN PARISH
P.O. BOX 455
CALIFON, NEW JERSEY 07830
2015 - 2016**

Student's Name _____
(FIRST) (MIDDLE) (LAST)

Place of Birth (City and State) _____

Date of Birth (Month/Day/Year) _____

Address _____

Telephone Number _____

School Attending _____ Grade _____

Father's Name _____ Religion _____

Mother's Name _____ Religion _____
First Last Maiden

Sacraments Received _____ **Date** _____ **Church** _____ **Location** _____

Baptism ** _____

First Eucharist _____

First Penance _____

How many years of Catechesis prior to this year? _____
Where? _____

Are you registered in this Parish? _____

Does your child/children attend Catholic School? _____ If yes, where?

**** Baptismal Certificates are necessary from those who were NOT baptized at St. John Neumann Parish. Please enclose a copy with your registration material. (If your child has received 1st Holy Communion at another parish, please include a copy of that certificate also.)**

This form is being sent to you for one of two reasons: Your child is new to our Parish Catechesis Gatherings OR it should be on file but is not. Please complete this form and return with registration. Registration will be incomplete without this form.