

**Holy Trinity Parish**  
**Faith Formation**  
**Registration 2010 - 2011**

Parent/Guardian \_\_\_\_\_ Phone \_\_\_\_\_

Residential Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email: \_\_\_\_\_ Members of Parish?    YES    NO

Emergency Contact/phone during class time \_\_\_\_\_

**Children to be enrolled in Faith Formation Program**

**NOTES:** If your child was not baptized at Holy Trinity Parish, the church office requires a copy of his/her baptismal certificate to hold on permanent file. If you have already given us a copy, we do have it on file. Please submit it with this registration. All information is confidential. If your child has special needs, please notify his/her teacher.

**FEES:** One child: \$30; Two or more children: \$50. Please make checks payable to Holy Trinity Parish. Do you need financial aid? YES NO Full Amount? YES NO

Full Name of Child \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

Sacraments Received: Baptism \_\_\_\_\_ Date of Baptism \_\_\_\_\_

Church of Baptism (name & address) \_\_\_\_\_

First Reconciliation \_\_\_\_\_ Church \_\_\_\_\_

First Eucharist \_\_\_\_\_ Church \_\_\_\_\_

Medical Conditions or Special Needs \_\_\_\_\_

Full Name of Child \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

Sacraments Received: Baptism \_\_\_\_\_ Date of Baptism \_\_\_\_\_

Church of Baptism (name & address) \_\_\_\_\_

First Reconciliation \_\_\_\_\_ Church \_\_\_\_\_

First Eucharist \_\_\_\_\_ Church \_\_\_\_\_

Medical Conditions or Special Needs \_\_\_\_\_

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Church of Baptism (name & address) \_\_\_\_\_

First Reconciliation \_\_\_\_\_ Church \_\_\_\_\_

First Eucharist \_\_\_\_\_ Church \_\_\_\_\_

Medical Conditions or Special Needs \_\_\_\_\_

Full Name of Child \_\_\_\_\_ DOB \_\_\_\_\_ Grade \_\_\_\_\_

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Church of Baptism (name & address) \_\_\_\_\_

First Reconciliation \_\_\_\_\_ Church \_\_\_\_\_

First Eucharist \_\_\_\_\_ Church \_\_\_\_\_

Medical Conditions or Special Needs \_\_\_\_\_

**Forms can be mailed to:**

Holy Trinity Parish  
46 Langdon Street  
Plymouth, NH 03264

Prek-8<sup>th</sup> Coordinator- Amy Ulricson - 536-4042  
Confirmation Coord - Maureen Ebner - 536-4964