



**ST. MARY SCHOOL, ELGIN, ILLINOIS
NEW STUDENT SACRAMENTAL INFORMATION**

Date of Form: _____

Name of Student: _____ **Grade:** _____

Name of Parents/Guardians: _____

Address: _____ **Home Phone:**(____) _____
street address city state zip

Student Lives With: ___ Both parents, ___ Mother, ___ Father, ___ Other(specify) _____

Mother's Religion? _____ **Father's Religion?** _____

Student's Siblings at St. Mary School or R.E.P.:

1. _____ 2. _____
name grade name grade

Student's Date of Birth: _____ **Place of Birth:** _____
city state

Student's Religion: _____

Date of Baptism*: _____ **Place:** _____
church city state

Date of First Reconciliation: _____ **Place:** _____
church city state

Date of First Communion: _____ **Place:** _____
church city state

Date of Confirmation: _____ **Place:** _____
church city state

If Catholic, how often does this student attend Mass each month? _____

If Catholic, how often does this student receive sacraments each month? _____

Other comments/information: _____

***PLEASE PROVIDE COPY OF BAPTISMAL CERTIFICATE**

Please return to the St. Mary Religious Education Office, 397 Fulton St., Elgin, IL 60120

Special Notations for Office Use Only

**ST. MARY RELIGIOUS EDUCATION OFFICE, ELGIN, ILLINOIS
NEW STUDENT SPECIAL CIRCUMSTANCE FORM**

Date of Form: _____

Name of Student: _____ Grade: ____ Same as Public School? ____

Name of Parents/Guardians: _____

Address: _____ Home Phone: (____) _____
street address city state zip

Child Lives With: ____ Both Parents, ____ Mother, ____ Father, ____ Other(specify) _____

Child's Date of Birth: _____

Religious Education Last Year: _____ Place: _____

Date of Baptism: _____ Place: _____
church city state

Date of First Reconciliation: _____ Place: _____
church city state

Date of First Communion: _____ Place: _____
church city state

Date of Confirmation: _____ Place: _____
church city state

Notes: