

**St. James the Apostle Faith Formation
 CCD Registration Form – School Year 2019-2020**

***** Please complete this form – all fields are required. Incomplete forms will not be processed. *****

**Please see complete list of Registration Requirements and submit all paperwork to:
 Sheila Remolar-Reduta (650) 743-5728 / sjtafaithformation@gmail.com**

Student's Age:			
Did you attend CCD last school year (2018-2019)? (please put an "X")	Yes:		No:
If yes, where did you attend CCD last school year (2018-2019)?			
If not, when was the last time you attended a CCD class/program? And where?	Year:		Where:
Are you attending CCD for the first time? (please put an "X")	Yes:		No:
Are you a registered parishioner of St. James? (please put an "X")	Yes:		No:
<i>Note: If you are not a registered parishioner of St. James, please contact the parish office (510) 792-1962 or email office@sjapostle.net and complete the Parish Registration Form. All students registering for CCD must be registered parishioners of St. James.</i>			

When were you baptized?	(Month-Day-Year):	
Where were you baptized?	(Name of Church):	
<i>Note: All **NEW** students must submit a copy of their Baptismal Certificate along with the registration form and payment.</i>		

Student's Last Name:		First Name:		M.I.	
Date of Birth: (month-day-year)		Grade Level in Fall:			
School:					
Home Address:					
City:		Zip Code:			
Home Phone:					
Father's Full Name:		Cell phone:			
Father's Email:					
Mother's First/Maiden Name:		Cell phone:			
Mother's Email:					

Sacraments your child has received:

Baptism (Year):		First Communion (Year):	
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Father's Religion:		Mother's Religion:	
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