



Saint Dominic Parish

PARISH FAITH FORMATION
15 Union Street
Westfield, NY 14787
716.326.2816

FAMILY REGISTRATION FORM

FAMILY NAME: _____
ADDRESS: _____

PHONE NUMBER: _____ CELL PHONE NUMBER(S): _____
E-MAIL ADDRESS: _____

FATHER'S NAME: _____ FATHER'S RELIGION: _____
MOTHER'S NAME: _____ MOTHER'S RELIGION: _____
MOTHER'S MAIDEN NAME: _____

IS YOUR FAMILY A REGISTERED MEMBER OF ST. DOMINIC PARISH (Westfield/Brocton): YES NO

CHILD 1: NAME: _____
BIRTHDATE: _____ PLACE OF BIRTH: _____
BAPTISMAL DATE: _____
CHURCH OF BAPTISM: _____
CITY/STATE OF BAPTISM: _____
SCHOOL CHILD IS PRESENTLY ATTENDING: _____
GRADE IN SCHOOL AS OF SEPTEMBER 2023: _____
HAS CHILD RECEIVED THE SACRAMENT OF RECONCILIATION? YES NO IF SO DATE: _____
HAS CHILD RECEIVED THE SACRAMENT OF EUCHARIST? YES NO IF SO DATE: _____
DOES THIS CHILD HAVE SPECIAL NEEDS? IF SO PLEASE LIST. _____

THOSE PEOPLE THAT CHILD ARE ALLOWED TO LEAVE PROPERTY WITH: _____

CHILD 2: NAME: _____
BIRTH DATE: _____ PLACE OF BIRTH: _____
BAPTISMAL DATE: _____
CHURCH OF BAPTISM: _____
CITY/STATE OF BAPTISM: _____
SCHOOL CHILD IS PRESENTLY ATTENDING: _____
GRADE IN SCHOOL AS OF SEPTEMBER 2023: _____
HAS CHILD RECEIVED THE SACRAMENT OF RECONCILIATION? YES NO IF SO DATE: _____
HAS CHILD RECEIVED THE SACRAMENT OF EUCHARIST? YES NO IF SO DATE: _____
DOES THIS CHILD HAVE SPECIAL NEEDS? IF SO PLEASE LIST. _____

THOSE PEOPLE THAT CHILD ARE ALLOWED TO LEAVE PROPERTY WITH: _____

CHILD 3: NAME: _____
BIRTH DATE: _____ PLACE OF BIRTH: _____
BAPTISMAL DATE: _____
CHURCH OF BAPTISM: _____
CITY/STATE OF BAPTISM: _____
SCHOOL CHILD IS PRESENTLY ATTENDING: _____
GRADE IN SCHOOL AS OF SEPTEMBER 2023: _____
HAS CHILD RECEIVED THE SACRAMENT OF RECONCILIATION? ____ YES ____ NO IF SO DATE: _____
HAS CHILD RECEIVED THE SACRAMENT OF EUCHARIST? ____ YES ____ NO IF SO DATE: _____
DOES THIS CHILD HAVE SPECIAL NEEDS? IF SO PLEASE LIST. _____

THOSE PEOPLE THAT CHILD ARE ALLOWED TO LEAVE PROPERTY WITH: _____

CHILD 4: NAME: _____
BIRTH DATE: _____ PLACE OF BIRTH: _____
BAPTISMAL DATE: _____
CHURCH OF BAPTISM: _____
CITY/STATE OF BAPTISM: _____
SCHOOL CHILD IS PRESENTLY ATTENDING: _____
GRADE IN SCHOOL AS OF SEPTEMBER 2023: _____
HAS CHILD RECEIVED THE SACRAMENT OF RECONCILIATION? ____ YES ____ NO IF SO DATE: _____
HAS CHILD RECEIVED THE SACRAMENT OF EUCHARIST? ____ YES ____ NO IF SO DATE: _____
DOES THIS CHILD HAVE SPECIAL NEEDS? IF SO PLEASE LIST. _____

THOSE PEOPLE THAT CHILD ARE ALLOWED TO LEAVE PROPERTY WITH: _____

CHILD 5: NAME: _____
BIRTH DATE: _____ PLACE OF BIRTH: _____
BAPTISMAL DATE: _____
CHURCH OF BAPTISM: _____
CITY/STATE OF BAPTISM: _____
SCHOOL CHILD IS PRESENTLY ATTENDING: _____
GRADE IN SCHOOL AS OF SEPTEMBER 2023: _____
HAS CHILD RECEIVED THE SACRAMENT OF RECONCILIATION? ____ YES ____ NO IF SO DATE: _____
HAS CHILD RECEIVED THE SACRAMENT OF EUCHARIST? ____ YES ____ NO IF SO DATE: _____
DOES THIS CHILD HAVE SPECIAL NEEDS? IF SO PLEASE LIST. _____

THOSE PEOPLE THAT CHILD ARE ALLOWED TO LEAVE PROPERTY WITH: _____
