Christ the King Catholic Church

2623 Perez Street

San Antonio, Texas 78207

(210) 433-6301

COMMUNITY CENTERED IN THE EUCHARIST …..

$30 Per Student each additional student $10

ADULT **CHILD** **Date of Registration:** _____

Please Print Clearly

Full Name (First, Middle, Last) _____

Date of Birth: _____ Place of Birth: _____

Address, City, Zip: _____ Telephone No. (_____) _____

Father's Name: _____ Mother's Maiden Name: _____

Sacraments (if not completed, leave blank):

Baptism (Parish, City, State): _____ Date of Baptism: _____

First Communion (Parish, City, State): _____ Date of First Communion: _____

Confirmation (Parish, City, State): _____ Date of Confirmation: _____

Confirmation Candidate Saint name: _____

Confirmation Candidate Sponsor (s) name: _____

Emergency Contact:

Name: _____ Relation: _____

Telephone No.: (_____) _____

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OFFICE USE ONLY

Forms Required:

Birth Certificate: _____

Baptismal Certificate: _____

First Communion Certificate: _____

Confirmation Certificate: _____

Sponsor Certificates: _____

NOTES: