

Paducah Catholic Community Faith Formation

2025-2026

Student Registration Information

Please complete information for all categories below.

Student Name: _____ **Date of Birth** _____

Address: _____ **City** _____ **Zip Code** _____

Home Phone Number: _____

Faith Formation Grade: _____ **Parish:** _____

Mass time your family attends: _____

Family E-mail Address: _____

Mother's Name: _____

Address: _____ **City** _____ **Zip Code** _____
(If different from above)

Cell # _____

Father's Name: _____

Address: _____ **City** _____ **Zip Code** _____
(If different from above)

Cell # _____

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