



Good Shepherd Catholic Church
 Faith Formation Office
 5900 Oleander Drive ~ Orlando, FL 32807-3492
 Phone: 407-277-3939 ext. 211/212



Student Information Form 2018-2019

For Office use only:

Child's first time in program Yes / No

Sacramental: FHC CONFIRMATION

Catechist _____

GSCS _____

Baptism Certificate _____

FHC Certificate _____

Please fill out one sheet per child registered.

STUDENT INFORMATION

Full Name _____

Birth Date _____ Place of Birth _____

School Name _____

Grade _____ Sex (Circle One): Male Female

Important Information we should know about your child [Special Needs, Allergies, Medications, Chronic Health Conditions, etc.]

Additional Comments

Sacrament Information [Baptismal Certificate with seal; and other Sacramental Certificates if applicable]:

Baptism:

Date: _____ Church Name _____ City, and State _____

Reconciliation:

Date: _____ Church Name _____ City, and State _____

First Holy Communion:

Date: _____ Church Name _____ City, and State _____

Confirmation:

Date: _____ Church Name _____ City, and State _____

CHECK LIST: Please complete and submit the following requirements together when you register your child for Faith Formation:

1. Family Registration Form (one per family)
2. Student Information Form (each child should have their own student form)
3. Copies of Baptismal & First Holy Communion certificates (as applicable, per child)
4. Signed Photo / Video Permission form (per child)
5. Please enclose payment. If check, made payable to Good Shepherd Catholic Church.

THANK YOU FOR SUBMITTING ALL REQUIREMENTS TOGETHER! ☺