



# CHURCH OF THE SACRED HEART

## REGISTRATION CATECHISM CLASS LEVEL \_\_\_\_\_

### PARTICULARS OF CANDIDATE

Name: \_\_\_\_\_ Sex: M F

Date of Birth: \_\_\_\_\_

Date of Baptism: \_\_\_\_\_

*(NB: A copy of Baptism Certificate must be submitted)*

Residential Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone No.: \_\_\_\_\_  
Residence: \_\_\_\_\_  
Handphone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Name of School: \_\_\_\_\_

### PARTICULARS OF PARENTS

Name of Father: \_\_\_\_\_

Religion (if not RC): \_\_\_\_\_

Contact: \_\_\_\_\_  
Office: \_\_\_\_\_  
Handphone: \_\_\_\_\_  
Email: \_\_\_\_\_

Name of Mother: \_\_\_\_\_

Religion (if not RC): \_\_\_\_\_

Contact: \_\_\_\_\_  
Office: \_\_\_\_\_  
Handphone: \_\_\_\_\_  
Email: \_\_\_\_\_

**NOTE:** For those transferred from Catechism classes of other parishes, please submit a letter from the parish priest confirming your attendance of the classes in his parish.