ST. ATHANASIUS PARISH, READING, MA
OFFICE OF RELIGIOUS EDUCATION
PERMANENT RECORD CARD
(To be filled out for each student entering the program for the first time)

Child's Information

Name _____Date of Birth_____
Last First

Address_____ Telephone_____

School _____ Grade Entering_____

Father _____Religion _____

Mother _____Religion _____
(Please include Maiden name)

Parent's Marriage: _____
Date Church City/State

Child's Baptism: _____
Date Church City/State
(Unless your child was baptized at St. Athanasius or at St. Agnes in Reading, please attach a COPY of his/her Baptism Certificate)

First Communion _____
Date Church City/State

FOR EMERGENCY (OPTIONAL)

WORK: Mom:_____ Dad:_____

CELL: Mom:_____ Dad:_____

EMERGENCY CONTACT: Name:_____ # _____

ALLERGIES: _____

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