

**SAINT RITA CHURCH**  
 8709 Preston Hwy \* Louisville, Kentucky 40219 \* (502) 969-4579

**RELIGIOUS EDUCATION FORM**

Sacrament:

Children's name:	First	Middle	Last
Address:			
Phone Number:			
Parent's email:			
Grade in School:			
Date of Birth:			
Place of Birth (City/State/Country)			
Father's Name:			
Father's Religion:		Baptized:	Yes    No
Mother's Name:			
Mother's Religion:		Baptized:	Yes    No
Have your children been Baptized?		Yes	No
Date of Baptism:			
Name of the Church:			
Church Address:			
<b>Include a copy of your child's baptismal certificate and a copy of your child's birth certificate</b>			
Is there any other information that you think is important for us to know, i.e. guardianship, etc.?			
<b>Official Use</b>			
<b>Sacrament:</b>		Bautism	<b>Notes:</b>
<b>Class:</b> _____		First Communion	
		Confirmation 1    2	