

# HOLY TRINITY PARISH GIFT PROGRAM REGISTRATION

2021 – 2022

Family Last Name \_\_\_\_\_ Best # \_\_\_\_\_

Mailing Address \_\_\_\_\_ Town & Zip \_\_\_\_\_

Street Address (if different) \_\_\_\_\_

Father \_\_\_\_\_ Mother \_\_\_\_\_  
*(Full Name) (Include Maiden Name)*

Emergency Contact Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email \_\_\_\_\_

Registered with Holy Trinity Parish?  Yes (If not, you need to register first.)

**GRADES: KINDERGARTEN – GRADE 12**

YOUNG PERSON'S NAME FIRST & MIDDLE				PLEASE CHECK SACRAMENT(S) RECEIVED			
INCLUDE LAST NAME <i>If different from the family name</i>	Date of Birth <i>(mm/dd/yr)</i>	M/F	Grade Sept. 2020	Baptism	Reconciliation (Confession)	Eucharist	Confirmation

*Please provide Baptismal Certificate if your child was not baptized here*

Please list any special circumstances which the catechist should know about your young person. (Ex. EpiPen, inhalers, medical conditions, behavioral issues, etc.)

On occasion, we display photos of our young people on the parish website, bulletin, and other religious publications (ex. The Parable Magazine)

If you would not like your young person's photo displayed, please check the following. \_\_\_\_\_ I would not like my young person's photo displayed.

*My signature indicates that I have read the information and given accurate responses.*

X \_\_\_\_\_  
*(Signature of Parent or Guardian)*

**Registration forms can be mailed to: Holy Trinity Parish, 11 School St., Plymouth, NH 03264  
 Or emailed to [holytrinitynh@gmail.com](mailto:holytrinitynh@gmail.com)**

**For more information please contact: Holy Trinity Parish GIFT Coordinator: Permanent Deacon Candidate  
 Dave Hemeon @ 603-496-7145**