

HOLY TRINITY PARISH GIFT PROGRAM REGISTRATION

2020 – 2021

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**

**For more information please contact: Holy Trinity Parish GIFT Coordinator: Permanent Deacon Candidate
 Dave Hemeon @ 603-744-2700**