

# Cathedral of St John IN-Formation Sheet

# Children

Student's Name	Grade	Age	Today's Date
	Birthdate		
Briefly Describe this Child (example: outgoing, careful, busy)			
Parent/Guardian Name		Interests/Skills to Share	
Home Phone		Parent/Guardian Mobile Phone	
Address		Parent/Guardian Email	
Does your child have any medical or emotional conditions we should know about?			
Is your child allergic to any foods, or follow a special diet?			
Emergency Contact Name		Emergency Contact Phone	

- We are glad to share with you in the religious formation of your children.
- Please share with your children the behavior you expect from them during Sunday School and the value you place on faithfulness.
- This is not a permission form for off site or overnight events.
- Please bring fresh fruit or vegetable to share on the Sunday closest to this child's birthday. (Summer birthdays pick a special Sunday).

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