Guardian Angels Church 1686 South Cleveland-Massillon Road Copley, Ohio 44321

REGISTRATION FORM FOR PARISH SCHOOL OF RELIGION

*All students Baptized outside Guardian Angels Church must supply a copy of their Baptismal Certificate when turning in this form.

Family Name				Christian Name			
Place of Birth				Year	Month	Day	
Name of Father				Religion			
Name of Mother				Religion			
Number of Freedom				riongion			
Church of Marriage				City/State			
Church of Marriage				City/State			
	Baptism* First			t Holy Communion	Confirmation		
Church	Baptism		trioly domination	dom			
City							
Date							
Date							
Date of Enrollment		From – Name of Parish		1	Parochial	PSR	
Public School Now Attending					Grade		
_							
Home Address					Home Telephone No.		
E-mail Address					Mobile Telephone No.		
2 man riddi 655					Mobile Teleph	tone no.	
Allergies we need to be concerned about							