

OUR LADY OF GUADALUPE CHURCH
345 Anita St., Chula Vista, CA 91911
(619) 422-1887



PERIOD 202_ - 202_

Please Print Child's Information:

Last Name: _____ First Name: _____ Boy _____ Girl _____
Address: _____ City _____ Zip Code _____
Ph. #: ____/____/____ Cellular: _____ E-mail _____
Birth Date: ____/____/____ Place of birth _____
Primary language at home: () Spanish () English Other: _____

CHILD'S SACRAMENT INFORMATION:

Baptized - Yes () Exact Date: ____/____/____ No ()
Name and City of the Church: _____
First Communion: Yes () Date: ____/____/____ No ()
Name and City of the Church: _____
Did the child attend catechism last year? Yes () No ()
Name of church _____ Catechist's Name: _____
Does the family attend Mass? _____ Where? _____

PARENTS' INFORMATION:

Father's Name: _____ Religion _____
Occupation: _____ Work number: ____/____
Baptized - Yes () No () First Communion - Yes () No () Confirmation - Yes () No ()
Mother's Maiden Name: _____ Religion _____
Occupation: _____ Work number: ____/____
Baptized - Yes () No () First Communion - Yes () No () Confirmation - Yes () No ()
Marital Status: Civil () Church () Single () Divorced () Separated () Other () Explain
Date of Marriage by Church _____
Church and City of Marriage: _____
Child lives with: (circle) Father Mother Stepparent Other: _____

In case that the Parents are not the legal guardians of the child, please fill the following:

Legal Guardian's Name: _____ Relationship _____
Occupation: _____ Work number: ____/____