



Our Lady of Prompt Succor Catholic Church

529 Highway 20, Thibodaux, Louisiana 70301

Phone: (985) 633-2903 ☩ Fax: (985) 633-9225

YOUTH FORMATION REGISTRATION FORM

Youth Formation 1st – 5th
 olopschackbay.htdiocese.org

Debra Stevens, CYF 6th – 11th
 Phone: 985-413-0367 | dstevens@htdiocese.org

We must have a registration form completed for EACH student.

Please **PRINT** clearly and complete **ALL** information for accuracy in updating our Church records.

ARE YOU A REGISTERED PARISHIONER OF OLPS CHURCH? ____ Yes ____ No

Child's Name: _____ **Date of Birth:** _____
First Middle Last

Home Address: _____
Street Address City State Zip Code

City/State of Birth: _____ **School Year:** _____ **Grade:** _____

Father's Name: _____
First Middle Last

Father's Cell: _____ **Email:** _____

Mother's Name: _____
First Middle Maiden Name Last

Mother's Cell: _____ **Email:** _____

Custodial/Stepparent: _____
First Middle Maiden Name Last

FIRST GRADE AND NEW STUDENTS MUST ANSWER THE FOLLOWING COMPLETELY

Church of Baptism: _____ **Date of Baptism:** _____

Church Address: _____
Street Address City State Zip Code

IF NEW, where were religion classes attended last year? _____

Please list the names and grades of other children in Youth Formation:

Please list any medical conditions or allergies that you feel we need to know about.

(All information on this form will be confidential.)

For Office Use Only:

Amount Paid \$ _____ Cash/Check No. _____ Date Paid: _____

Please make checks payable to OLPS Church