St. Brigid of Kildare Jordan Conference – Registration Form

Date:					
Name of Child:	First	irst Middle Last			
Date of Birth:	City of Birth:				
Father's Name:_			Catholic:	yes	no
Mother's (Maider	n):		Catholic:	yes	no
Address:					
			Phone:		
	Email:				
(Godparents – One	MUST be a pra	cticing Roman Cath	holic)		
Godfather's Nan		Catholic:	yes	no	
Godmother's Na	ıme:		Catholic:	yes	no
Date of Jordan (Conference S	ession Requested	d:		
Date of Baptism	Requested:				
Signature of Parent	t(s)				
T- 41 C'1 CC''-	11	Parish Office Use	•		_
Is the family officia			s: ye	snc)
Jordan Conference	Instructor's N	lotes:			
Signature of Jordan	n Conference I	nstructor			