Church Parish Sheet for ST. BERNARD SCHOOL 251 E. Bridge Street Breaux Bridge LA 70517

This portion must be completed by the parishioner.

Name of Father/Guardian	Phone number of Father/Guardian	Email address of Father/Guardian
Name of Mother/Guardian	Phone number of Mother/Guardian	Email address of Mother/Guardian
	Name of Children	
Name of Church Parish	Ci	ty and State of Church Parish
*****	*****	*****
This portion must be complete	d by the Pastor of your church p	arish.
This family is (Pastor is to sele	ect one):	
Territorial	(Pastor's signature)	(Date)
Registered		
	(Pastor's signature)	(Date)
Registered, attends regularly	(Pastor's signature)	(Date)
Registered, attends regularly,	(Pastor's signature)	(Date)

or fax to SBS at (337) 332-5894