

**Immaculate Conception Parish CCD Office**  
**4497 West 1<sup>st</sup> Avenue Hialeah, Fl 33012 Phone: (305)823-9563 Email: ICCCD@AOL.COM**  
**Registración del Catecismo (Primer año)**

Apellido del Niño: \_\_\_\_\_ Nombres: \_\_\_\_\_  
Direccion: \_\_\_\_\_ Ciudad: \_\_\_\_\_  
Estado: \_\_\_\_\_ Zona Postal: \_\_\_\_\_ Teléfono de la Casa: \_\_\_\_\_  
Teléfonos del trabajo de los Padres: Madre : \_\_\_\_\_ Padre: \_\_\_\_\_  
Teléfonos de Emergencias: \_\_\_\_\_  
Correo Electronico \_\_\_\_\_

**EL NIÑO VIVE CON**

Los dos padres: \_\_\_\_\_ Padre: \_\_\_\_\_ Madre: \_\_\_\_\_ otros: \_\_\_\_\_  
Nombre y Apellido del Padre: \_\_\_\_\_  
Nombre y Apellido de soltera de la Madre: \_\_\_\_\_  
Otros hermanos en el programa de Catecismo: \_\_\_\_\_


**POR FAVOR ESCRIBA EL NOMBRE DE LOS ADULTOS (MAYOR DE 18 AÑOS) QUE PODRAN RECOGER A SU NIÑOS**

1 \_\_\_\_\_ Relacion con el niño \_\_\_\_\_  
2 \_\_\_\_\_ Relacion con el niño \_\_\_\_\_  
3 \_\_\_\_\_ Relacion con el niño \_\_\_\_\_  
4 \_\_\_\_\_ Relacion con el niño \_\_\_\_\_


**INFORMACION DEL ESTUDIANTE**

Fecha de Nacimiento: \_\_\_\_\_ Edad: \_\_\_\_\_ Sexo \_\_\_\_\_  
Lugar de Nacimiento: \_\_\_\_\_  
Escuela: \_\_\_\_\_ Grado: \_\_\_\_\_

**CLASES DEL CCD (SOLO PARA USO DE LA OFICINA)**

Miercoles 4:00pm – 5:30pm (1<sup>st</sup> grado a 6<sup>th</sup> grado)  Clase # \_\_\_\_\_  
Miercoles 7:00pm to 9:00pm (7<sup>th</sup> grado a 12<sup>th</sup> grado) Confirmation Clase # \_\_\_\_\_  
Sabado 10:00 am to 12:00 am (1<sup>st</sup> grado a 6<sup>th</sup> grado) Clase # \_\_\_\_\_

**INFORMACION DE SACRAMENTOS RECIBIDOS**

Bautizo Si: \_\_\_\_\_ No: \_\_\_\_\_ Dia del Bautimo: \_\_\_\_\_   
Iglesia del Bautizo: \_\_\_\_\_ Ciudad/Estado: \_\_\_\_\_  
Confesion Si: \_\_\_\_\_ No: \_\_\_\_\_ Comunion Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Entrego Cert. Si: \_\_\_\_\_ No: \_\_\_\_\_ Necesita Bautizo o Profesion de Fe: Si: \_\_\_\_\_ No: \_\_\_\_\_

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|                       |                  |                             |
|-----------------------|------------------|-----------------------------|
|                       | \$60.00 – 1 NIÑO | COSTO DE LA MATRICULA _____ |
| COSTO DE LA MATRICULA | \$70.00 – 2 NIÑO | PAGO: _____                 |
|                       | \$80.00 – 3 NIÑO |                             |

COMENTARIOS: \_\_\_\_\_

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CCD Registration (First Year)

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Parents work Phone: Mother \_\_\_\_\_ Father \_\_\_\_\_  
Emergencies phones: \_\_\_\_\_  
Email \_\_\_\_\_

**CHILD LIVE WITH**

Both parents: \_\_\_\_\_ Father: \_\_\_\_\_ Mother: \_\_\_\_\_ others: \_\_\_\_\_  
Father's Name \_\_\_\_\_  
Mother's Maiden Name (Last and first name) \_\_\_\_\_  
Other brother and sister in the CCD program: \_\_\_\_\_


**PLEASE LIST THE NAMES OF FOUR ADULTS (18 YEAR OR OLDER) WHO ARE ALLOWED TO PICK UP YOUR CHILDREN**

1 \_\_\_\_\_ Relation to child \_\_\_\_\_  
2 \_\_\_\_\_ Relation to child \_\_\_\_\_  
3 \_\_\_\_\_ Relation to child \_\_\_\_\_  
4 \_\_\_\_\_ Relacion to child \_\_\_\_\_


**STUDENT BIRTH INFORMATION**


Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender \_\_\_\_\_  
Place of Birth: \_\_\_\_\_  
School: \_\_\_\_\_ Grade: \_\_\_\_\_

**CLASS TIME CHOSEN (OFFICE USE ONLY)**

Wednesday 4:00pm – 5:30pm (1<sup>st</sup> grade to 6<sup>th</sup> grade)  Room # \_\_\_\_\_  
Wednesday 7:00pm to 9:00pm (7<sup>th</sup> grade to 12<sup>th</sup> grade) Confirmation Room # \_\_\_\_\_  
Saturday 10:00 am to 12:00 am (1<sup>st</sup> grade to 6<sup>th</sup> grade) Room # \_\_\_\_\_

**SACRAMENTS INFORMATION**

Baptism Yes: \_\_\_\_\_ No: \_\_\_\_\_ Date of Baptism: \_\_\_\_\_   
Baptism Church: \_\_\_\_\_ City/State: \_\_\_\_\_  
Confession Yes: \_\_\_\_\_ No: \_\_\_\_\_ Communion Yes: \_\_\_\_\_ No: \_\_\_\_\_  
Bring Cert. Yes: \_\_\_\_\_ No: \_\_\_\_\_ Need Baptism or Profession of Faith Yes: \_\_\_\_\_ No: \_\_\_\_\_



REGISTRATION FEE      \$60.00 – 1 CHILD      TOTAL FEES: \_\_\_\_\_  
                                 \$70.00 – 2 CHILDREN      PAID: \_\_\_\_\_  
                                 \$80.00 – 3 CHILDREN

COMMENTS: \_\_\_\_\_