



CHURCH OF STS PETER & PAUL

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Affix Child's
Photo

REGISTRATION FOR CATECHISM CLASS

PARTICULARS OF CHILD	
NAME :	
DATE OF BIRTH :	GENDER : MALE / FEMALE
BIRTH CERT NO. / ID NO. :	COUNTRY OF BIRTH :
NAME OF SCHOOL :	NATIONALITY :
CLASS :	
Pls advise if there is any existing medical condition :	
BAPTISM & FIRST HOLY COMMUNION DETAILS	
DATE OF BAPTISM (dd/mm/yyyy) :	PARISH :
DATE OF FIRST HOLY COMMUNION (dd/mm/yyyy) :	PARISH :
CONTACT DETAILS	
HOME :	MOBILE :
EMAIL :	
ADDRESS :	
PARTICULARS OF PARENTS / GUARDIAN	
NAME OF FATHER/GUARDIAN :	
RELIGION :	NATIONALITY :
CONTACT DETAILS	
HOME :	OFFICE :
MOBILE :	
EMAIL :	
ADDRESS :	same as above

NAME OF MOTHER/GUARDIAN 2 :

RELIGION :	NATIONALITY :
CONTACT DETAILS	
HOME :	OFFICE :
MOBILE :	
EMAIL :	
ADDRESS :	same as above

PARISH YOUR FAMILY WORSHIP IN REGULARLY :

SIBLINGS ATTENDING CATECHESIS IN THE CHURCH OF STS PETER AND PAUL

	Name	Age
1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____

Compliance with Guidelines for the Protection of Personal Data

In completing this form, I consent to:

- (a) The collection, storage, retention, adaptation, modification, reading, retrieval, use, transmission, blocking, erasure or destruction (“Processing”) of the personal data provided by me in this Form (“Personal Data”);
- (b) The Parish processing my Personal Data for the purpose of registration for the Catechism Class of my child/ward conducted by the Church entity;
- (c) The Parish transferring my child/s/ward’s Personal Data to other church entities within the Catholic Archdiocese of Singapore;
- (d) The Parish taking photos, videos or audio recordings which may contain image/audio of my child/ward and may be used for archival purposes, on Parish’s website, publications and for publicity purposes.

I, _____ consent to the above terms.

Signature :

Date :

(Please attach a copy of Certificate of Baptism, First Holy Communion and letter of transfer from previous parish if applicable)