St. Joseph's Church, **Bukit Timah**
Tel: 6769-1666

REGISTRATION FOR SECONDARY CATECHISM

(Level 7 and New)

IMPORTANT: Compliance with Guidelines for the Protection of Personal Data

In filling 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 church entity processing my Personal Data for the purpose of my application.
c. The church entity transferring my Personal Data to other church entities within the Catholic Archdiocese of Singapore, and/ or the Catholic Archdiocese overseas, where applicable.

Please attach photocopies of:

☐ Baptism Certificate ☐ First Holy Communion Certificate ☐ Transfer letter from previous parish

STUDENT'S PARTICULARS

Full Name (underline surname) :_____

Address: _____

Postal Code: _____ *Student Email Address: _____

Telephone no (Home): _____ *Student Mobile No: _____

Date of Birth: _____ Country of Birth: _____ Age: _____ Sex : M / F

Baptized on: _____ at the Church of _____

School: _____ Secondary: _____

Have you received First Holy Communion : YES / NO

Did you complete Level 6 at SJC : YES/NO If No, please indicate church : _____

PARENTS' PARTICULARS

Father's Full Name: _____ Religion: _____

Father's Contact No : Mobile : _____

Email: _____

Mother's Maiden Name: _____ Religion: _____

Mother's Contact No: Mobile : _____

Email: _____

Married in the Church of: _____ On _____

_____

PARENTS SIGNATURE/DATE

_____

TO BE COMPLETED BY CATECHIST

(if student is a transfer please state parish) _____

Class assigned to _____ Start Date: _____ Date Received: _____