



Our Lady of Perpetual Help Parish

2465 Crown Street, Vancouver, B.C. V6R 3V9 Tel: 604-224-4344 Fax: 604-224-4323

PARISH RELIGIOUS EDUCATION PROGRAM (PREP)

2026 – 2027	DATE: _____
NAME OF STUDENT	PARENTS' INFORMATION
LAST NAME _____	FATHER'S NAME _____
FIRST NAME _____	RELIGION _____
DATE OF BIRTH _____	TEL _____
SCHOOL ATTENDING _____	EMAIL _____
SCHOOL GRADE _____	MOTHER'S NAME _____
HOME ADDRESS _____	RELIGION _____
EMERGENCY CONTACT	TEL _____
NAME _____	EMAIL _____
TEL _____	SACRAMENTS RECEIVED
PARISH AFFILIATION	<input type="checkbox"/> BAPTISM YEAR: _____
<input type="checkbox"/> OLPH	<input type="checkbox"/> FIRST RECONCILIATION YEAR: _____
<input type="checkbox"/> OTHER PARISH _____	<input type="checkbox"/> FIRST COMMUNION YEAR: _____
(Name of Parish)	<input type="checkbox"/> CONFIRMATION YEAR: _____
PARISH RELIGIOUS EDUCATION PROGRAM (PREP)	DATE OF BAPTISM: _____
Have you done PREP classes before?	PLACE OF BAPTISM: Church Name, City and Country
_____	_____
If YES, Grade Level of PREP Completed & The Year	<input type="checkbox"/> COPY OF BAPTISMAL CERTIFICATE ATTACHED
_____	ALLERGIES <input type="checkbox"/> YES <input type="checkbox"/> NO
	(Please provide information)

ADMIN NOTES: _____

PAYMENT: Cash Cheque Online E-Transfer **PAYMENT RECEIVED DATE:** _____