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| **FULL NAME / NOMBRE COMPLETO** |  | **BIRTH DATE/****FECHA DE****NACIMIENTO** | **RELIGION/ RELIGION** | **BAPTISM/****BAUTISMO** | **COMMUNION/****COMUNION** | **CONFIRMATION/****CONFIRMACION** | **OCCUPATION/****EMPLEO** |
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**SPECIAL NEEDS / NECESIDAD ESPECIAL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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