HOLY FAMILY CHURCH

Registration for First Holy Communion Programme

Name of Child		
School		
Grade Teacher		_
Parents' or Guardians' Names		
Street Address	Apt. Number	Access Code
City	Postal	l Code
Tel E	-mail	
Child's Date of Birth		
Date of Baptism		
Church of Baptism		
_		
Certificate of Baptism: Attached Baptized at Holy Family	Will Bring as Soon as Possibly or St Vincent's (No need to prov	• •
(One has to be baptized prior to receive certificate for your child, please contact copy to be sent to you. If you encounted the date of first Confession. If your childs possible to arrange for baptism.)	ct the church where your child wo r any problems, please call the re	as baptized and ask for a ectory well in advance of
Declaration: I would like my child to receive religion best to ensure regular attendance at cate Saturday evening) Mass. I agree that he reason to delay my child's first Communication.	echism classes and regular assista abitual absence from the classes	ance at Sunday (or
Signature of Parent or Guardian:		Date: