



# First Holy Communion Registration Form

Please complete this form and return it to the parish  
(PLEASE PRINT)

**Name of School:** \_\_\_\_\_ **City:** \_\_\_\_\_

- I currently live within the territorial boundaries of the parish.
- I currently **do not** live within the territorial boundaries of the parish, but I am formally registered at the parish.

## Child's Information

Full legal name of child:

\_\_\_\_\_

First Name

Middle Name(s)

Last Name

Male  Female **Date of Birth:** \_\_\_\_\_ **City of Birth:** \_\_\_\_\_

**Church of Baptism:** \_\_\_\_\_ **Date of Baptism:** \_\_\_\_\_

**Address of Baptismal Church:** \_\_\_\_\_

## Parent's Information

**Mother (Full legal name & Maiden Name):**

\_\_\_\_\_

First Name

Middle Name(s)

Last Name

(Maiden Name)

**Religion:**  Roman Catholic **Other:** \_\_\_\_\_  None

**Present Address:** \_\_\_\_\_

Street

City

Postal Code

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

- I am a parent of, or have legal custody of the child.

**Father (Full legal name):**

\_\_\_\_\_

First Name

Middle Name(s)

Last Name

**Religion:**  Roman Catholic **Other:** \_\_\_\_\_  None

**Present Address:**  Same as mother's

Street

City

Postal Code

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

- I am a parent of, or have legal custody of the child.

## Declaration

I, the undersigned, declare that the information on this form is true and accurate.

**Name (PLEASE PRINT):** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_