



## FIRST HOLY COMMUNION Registration Forms for Catholic Schools

Before completing the attached registration, please ensure that:

- Your child is baptised in the CATHOLIC faith
- You have attached a **PHOTOCOPY** of your child's baptism certificate **even if your child was baptized at St. Clare of Assisi**

If you have any concerns about the above requirements, please contact Msgr. John or Fr. Antonello as soon as possible.

Please **TYPE** the attached registration forms and drop off in the parish hall during one of the following scheduled times:

- **Saturday, June 2, 2018 from 3:00 – 4:30 p.m.**
- **Saturday, June 9, 2018 from 3:00 – 4:30 p.m.**

### **Important Notice for Children Baptized in an Orthodox Rite or Eastern Rite Catholic Church**

Please check your child's baptismal certificate to verify if your child has already received confirmation at baptism. If so, your child is welcome to participate in all aspects of the confirmation program at St. Clare Church and at your school, however they may only receive a blessing during the celebration since they have already received the sacrament. They may, so as not to be excluded, wear the red gown and receive a special blessing after their classmates are confirmed.

#### **Examples of churches administrating confirmation at baptism:**

- Chaldean Catholic
- Greek Catholic
- Ukrainian Catholic
- Armenian Church
- Syrian Church
- Orthodox Church



ST. CLARE OF ASSISI PARISH

150 Saint Francis Ave.,

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Tel: (905) 653-8000

[stclareofassisiwo.archtoronto.org](http://stclareofassisiwo.archtoronto.org)

2019

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**Photocopy** of Baptismal Certificate

NAME OF SCHOOL

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CHILD'S FIRST NAME\*

CHILD'S MIDDLE NAME\*

CHILD'S LAST NAME\*

\*AS IT APPEARS ON BAPTISM CERTIFICATE

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DATE OF BIRTH (DD/MM/YYYY)

DATE OF BAPTISM (DD/MM/YYYY)

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CHURCH OF BAPTISM

CITY/COUNTRY

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FATHER'S FIRST & LAST NAME

MOTHER'S FIRST & MAIDEN NAME

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HOME ADDRESS

CITY

POSTAL CODE

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HOME/CELL PHONE NUMBER

EMAIL ADDRESS

Please indicate the number of people in your **immediate family**:

*Please do not include child receiving 1<sup>st</sup> Holy Communion in this number.* Seating will be reserved for the child's parents and brothers and sisters only. Your child will be seated together with his/her school mates who are receiving their First Communion. Seating will NOT be reserved for grandparents and extended family.

### Declaration of Intent and Acknowledgement of Commitment:

It is my/our intention that my/our child receives the Sacraments of *First Reconciliation and First Communion* in the community of St. Clare of Assisi Parish. I/We acknowledge our responsibility to journey with him/her at home and commit to support him/her in the best way during and after this preparation. As parent(s)/guardian(s) I/we recognize that the best way of accomplishing this obligation is by faithful attendance at Sunday Eucharist.

\_\_\_\_\_  
SIGNATURE OF PARENT/GUARDIAN

\_\_\_\_\_  
DATE