



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:

- **Wednesday, June 19, 2019 from 7:00 – 8:30 p.m.**
- **Wednesday, June 26, 2019 from 7:00 – 8:30 p.m.**

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

If your son or daughter was baptized in one of the following churches, they have already received their first communion. If so, we are willing to have them participate with their classmates who are receiving for the first time.

In order for your child to do so, you MUST fill out a registration form and send it to us with a copy of your child's baptismal certificate so they can participate with their classmates.

Examples of churches administrating communion at baptism:

Greek Catholic

Armenian Catholic

Ukrainian Catholic

Syrian Catholic

Orthodox Catholic



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Photocopy of Baptismal Certificate

| | | |
|--|---|---------------------------|
| | | |
| NAME OF SCHOOL | | |
| | | |
| CHILD'S FIRST NAME* | CHILD'S MIDDLE NAME* | CHILD'S LAST NAME* |
| *AS IT APPEARS ON BAPTISM CERTIFICATE | | |
| | | |
| DATE OF BIRTH (DD/MMM/YYYY) | DATE OF BAPTISM (DD/MMM/YYYY) | |
| | | |
| CHURCH OF BAPTISM | CITY/COUNTRY | |
| | | |
| FATHER'S FIRST & LAST NAME | MOTHER'S FIRST & MAIDEN NAME | |
| | | |
| HOME ADDRESS | CITY | POSTAL CODE |
| | | |
| HOME/CELL PHONE NUMBER | EMAIL ADDRESS | |

Please indicate the number of people in your immediate family:

Please do not include child receiving 1st 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