



# First Holy Communion Registration Form

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

## Parish Information

Name of Parish: \_\_\_\_\_ 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: \_\_\_\_\_