

2019 First Holy Communion Registration Form

Child's Name:.....

Parent(s) names:.....

Parents E mail:.....

By supplying this information you are consenting to allow us to contact you via email.

Signed: **Name in Capitals:**.....

Parent's Contact numbers: Home:.....

Mobile:.....

Church of Baptism:.....

If the candidate was not baptised at St James, please supply a copy of their Baptismal certificate.

Name of school attending:.....

Additional Needs:

Please let us know if your child has any additional needs that we should be aware of so we are able to give them the necessary support. This includes any medical needs such as Asthma and Allergies.

Details:.....

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Please indicate your preferred date below. We cannot guarantee you will get this date but we will do our best to accommodate you. If you tick the no preference box you will be allocated a date.

Saturday 8th June 2019

Saturday 15th June 2019

No preference

PLEASE RETURN COMPLETED FORM TO THE PARISH OFFICE (281A CRESCENT DRIVE)

All Information will be kept confidential