



St. Andrew's Roman Catholic Church
First Confession & First Communion
Initial Registration Form

Dear Reverend Father:

Our child is a **baptized Roman Catholic**. We wish to register him/her for First Confession and First Communion which will be celebrated this coming year at St. Andrew's Parish where our family attends Mass.

Signature of Applicant

APPLICANT INFORMATION

NAME (FIRST & LAST): _____

ADDRESS: _____

POSTAL CODE: _____ PHONE NUMBER: _____

EMAIL ADDRESS: _____

CHILD'S DATE OF BIRTH: _____ PLACE OF BIRTH: _____

CHILD'S SCHOOL: _____

CHURCH OF CHILD'S BAPTISM: _____

ADDRESS OF CHURCH OF BAPTISM: _____

If your child was **not** baptized at St. Andrew's Church, please attach a copy of the Baptismal Certificate. If you do not have a copy of the Baptismal Certificate, please contact the church where the child's baptism took place to obtain a new copy.

FATHER'S NAME: _____

MOTHER'S NAME: _____ MAIDEN NAME: _____

NAME OF GUARDIAN (where applicable): _____

If you attend St. Andrew's Parish and are **not** a Registered Parishioner, please **complete a Parish Registration Form and return it to the parish office with this application.**

**PLEASE RETURN THE COMPLETED FORM AND ALL RELATED DOCUMENTS
TO THE PARISH OFFICE**