

ST MARY MOTHER OF GOD PARISH

FIRST COMMUNION/RECONCILIATION PROGRAMME 2020– 2021

APPLICATION FORM

Child's Full Name

Date of Birth

Date of Baptism Parish

SchoolYear (Sep 2020).....

Parents Names

Address

..... Post Code

Mum's Religion Dad's Religion

For Catholic parents please give the additional information:

Year of First Communion Parish

Year of First Communion Parish

Where do you attend Sunday Mass

How often do you attend Mass

Home Tel. No

Mobile No's: Mum Dad

E-Mail Address

Emergency Contact (other than parents)

Medical conditions or allergies we should be aware of

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Any family circumstances you would like us to be aware of

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