## ST. MARY'S CATHOLIC CHURCH — LEEDERVILLE Sacramental Programme 2025



REGISTRATION FOR THE SACRAMENT OF FIRST RECONCILIATION	
Personal Details	
Child's Name (including middle name)	
Child's Family Name (Surname)	
Academic Year (School Year)	
Name of School currently attending	
Date of Birth	
Date of Baptism & please attach the Baptism Certificate	
Contact Details	
Street No. (Unit No.)	
Street Name	
Suburb	
Post Code	
Mother's Name	
Mother's Mobile Number	
Father's Name	
Father's Mobile Number	
Parent Email	

## Note

- > This form must be completed by either the Parent / Guardian of the above child as the information provided needs to be accurate for Parish records and for Certificates.
- > Attach a copy of your child's Baptism Certificate to the form.
- > Submit the form directly to the Parish Office either in person or via email.
- > The Parish email is <a href="mailto:leederville@perthcatholic.org.au">leederville@perthcatholic.org.au</a>