

FIRST HOLY COMMUNION REGISTRATION (Year 3+) 2023/24

(Please fill in All sections & Write Clearly in Capitals)

Name of Child:				
Date of Birth:	•••••			
Date & Place of Baptism:				
School Attended:			Year	Group
Name of Mother:		Name of Fath	er:	
Address:				
	Post (Code:		
E mail:			•••••	
Tel. no: (Home)		(Mobile)		
Church / Place of Marriage:				
Church of regular Sunday Mass attenda	nce and time	e of Mass:		
Please tick who you are known to:	Fr Pat 🛛	Fr Chris	🗆 🛛 Fr Allan	
Do you belong to <u>any</u> of our Parish grou	ps? (Please s	pecify)		
Tell us below how you intend to sup Communion at this Parish?	port your c	hild in prepo	aring for the	reception of Holy
Has your child any special needs?	Yes		No	
Are you registered as a parish member?	e Yes		No	
Signature of Parent / Guardian:			Date:	
Please Note: Original certificate of Baptism in the Roman Catholic Church and a £20 contribution for books and all expenses must accompany this form. Cash or cheques payable to: Servite Friars, London Parish.				

All registration forms <u>Must</u> be returned to the Parish Office <u>Closing Date is 30th October 2023 (Monday)</u>