

Eucharist Registration Form 2015

Child's Name* _____
(First, middle and last)

Father's Name* _____
(First and last)

Mother's Maiden Name* _____
(First and last before marriage)

Address* _____
(Street) (City) (State) (Zip)

Home Phone _____ Cell: _____ Work _____

E-mail address _____

Child lives with: _____
(Both parents, mother & stepfather, etc.)

Is there an additional name & address to send information (i.e. non-custodial parent)?

Does this parent know that this child is preparing for First Eucharist? _____

Child's Place of Birth* _____ Date _____
(City & State)

Does Your Child Attend Mass weekly? Yes No

My Child has one full year of previous religious instruction and is currently attending O.L.O.S. Faith Formation classes, St. Mary's School, or Cardinal Hickey Academy, or formal home school Yes No

Child's Age at date of First Eucharist, March 21, 2015 _____

How do you want your child's name to appear on the First Eucharist certificate?

(Please Print) _____

Parent signature _____

**This information will be transcribed into the Official Church Register and must be accurate and true.*

(over)

Would your child be interested in reading at the group First Communion Mass on March 21?

Yes

No

Is there another family in the First Communion class you would like to sit with?

Name: _____

The following friends or family members would like to serve as

Altar Servers _____

Lector _____

Eucharistic Minister _____