

FIRST RECONCILIATION, CONFIRMATION AND FIRST EUCHARIST REGISTRATION

St. Jean Baptiste Parish
10020-100 Ave, Morinville, AB T8R 1P7
Phone 780-939-4412 Fax 780-939-2016

PLEASE PRINT

Child's Last Name: _____

Child's Baptismal Names: _____

Date of Birth: _____ Father's Name: _____

Mother's Name: _____ Maiden Name: _____

Phone # _____ Address: _____

Postal Code: _____ E-mail: _____

School Child Attends: _____ Grade: _____

Name of Parish Your Child Baptized in: _____

We require a copy of the baptismal certificate if not baptized in this parish asap.

City/Province Parish Located: _____

Are you a registered member of St. Jean Baptiste Parish? Please circle YES or NO

I am enrolling my child in...(check the classes that apply)

1st Reconciliation _____ / Confirmation _____ / 1st Eucharist _____

We are planning to have classes Mondays and Thursdays from 6:45 to 7:45pm.

My preference is Monday class _____ Thursday class _____ or does not matter _____.

Confirmation Sponsor's Name _____

As a parent I will help my child prepare for the sacraments. I will bring my child into the class and come into the building to pick them up. I will stay at times indicated on the schedule.

Parent's Signature _____

Baptismal Certificate is required on St. Jean Baptiste's records to receive the sacraments in this Parish. If you do not have a copy contact the Parish your child was Baptized in and have it faxed or mailed to this Parish.

A \$15 fee for each sacrament enrolled in is required. This fee is for books and supplies. The exact amount is appreciated or a cheque made out to St. Jean Baptiste Parish.