



# Our Lady of the Assumption, Sylvan Lake

## 1<sup>st</sup> Communion & 1<sup>st</sup> Reconciliation Registration 2019/2020

**Please print legible (*all information required*)**

Name of Child: \_\_\_\_\_  
Surname First Name Middle name (s)  
Date of Birth: \_\_\_\_\_  
Day Month Year \_\_\_F\_\_\_M  
Father: \_\_\_\_\_  
Last name Given Name Religion  
Mother: \_\_\_\_\_  
Last name Given Name Religion  
Address: \_\_\_\_\_  
Street City/Town Postal Code  
Email address: \_\_\_\_\_  
(Please print legible)

Primary Phone #: \_\_\_\_\_ Cell: \_\_\_\_\_ *Mother or Father*

Was the child baptized in the Roman Catholic Church? Yes \_\_\_\_\_ No \_\_\_\_\_

Baptism: (Date) \_\_\_\_\_ (Parish) \_\_\_\_\_

**A copy of your child's baptism certificate is required**

Was the child baptized in another Christian ecclesial (*church*) community? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes denomination \_\_\_\_\_

When making a Profession of Faith the child is received into the Roman Catholic Church

### **Permission of Parent(s) for the child:**

\_\_\_\_\_ to make a Profession of Faith

*(When making a Profession of Faith the child is received into the Roman Catholic Church)*

\_\_\_\_\_ to received the Sacrament of 1<sup>st</sup> Communion & 1<sup>st</sup> Reconciliation

\_\_\_\_\_  
Signature(s) of Parent(s) or Guardians

\_\_\_\_\_  
Date

**\$30 Registration Fee: includes workbook(s) and retreat**  
**Cheque payable to "Our Lady of the Assumption"**

Name of School: \_\_\_\_\_ Grade: \_\_\_\_\_

*(If your child is **not attending** a Catholic School you will be required to teach a Home Based Catechism Program – Material will be provided to you for a fee)*

### **For Parish office use**

**Registration:** Cash \_\_\_\_\_ Cheque \_\_\_\_\_ Received by \_\_\_\_\_ Date \_\_\_\_\_

Baptism Certificate \_\_\_\_\_ Photo \_\_\_\_\_

**Dates:** 1<sup>st</sup> Communion \_\_\_\_\_ 1<sup>st</sup> Reconciliation \_\_\_\_\_

Profession of Faith \_\_\_\_\_ Other \_\_\_\_\_