

St. Catherine of Siena Parish

First Communion Information Form

Dear Parents,

As your child receives each sacrament of initiation (Baptism, Confirmation and Holy Eucharist), the parish must record certain information. Please fill out the form below and return it to school/Religious Education class by the designated date. Also, please write your CHILD'S FULL NAME as you would like it to appear in the Mass booklet.

CHILD'S FULL NAME _____

CHILD'S PLACE OF BIRTH _____ (city and state)

CHILD'S DATE OF BIRTH _____

CHILD'S AGE (Comm. date) _____

CHILD'S PLACE OF BAPTISM _____ (church)
_____ (city and state)

CHILD'S DATE OF BAPTISM _____
month day year

CURRENT RESIDENCE _____

PHONE NUMBER _____

FATHER'S FULL NAME _____

MOTHER'S FULL NAME _____

MOTHER'S MAIDEN NAME _____

Please return this form no later than TUESDAY, DECEMBER 1ST

THANK YOU AND GOD BLESS YOU!!