



# ALL SAINTS' PARISH COMMUNION REGISTRATION FORM

Please complete this form and return it to Anna Betro, Youth Office  
(PLEASE PRINT)



## Parish Information

Name of Parish: \_\_\_\_\_ City: \_\_\_\_\_

- I currently live within the territorial boundaries of the parish.
- I currently **do not** live within the boundaries of the parish, but I am formally registered at the parish.

## Child's Information

Full legal name of child:

\_\_\_\_\_

First Name    Middle Name    Last Name

Male     Female    Date of Birth: \_\_\_\_\_    City of Birth: \_\_\_\_\_

Church of Baptism: \_\_\_\_\_

Address of Baptismal Church: \_\_\_\_\_

School Child Attends: \_\_\_\_\_

## Parent's Information

**Mother** (Full legal name & Maiden Name):

\_\_\_\_\_

First Name    Middle Name(s)    Last Name

Religion:  Roman Catholic    Other: \_\_\_\_\_     None

Present Address: \_\_\_\_\_

Street    City    Postal Code

Phone: \_\_\_\_\_    **Email** \_\_\_\_\_

(use this email for communication)

I am the parent of, or have the legal custody of the child.

**Father** (Full legal Name):

\_\_\_\_\_

First Name    Middle Name(s)    Last Name

Religion:  Roman Catholic    Other: \_\_\_\_\_     None

Present Address: \_\_\_\_\_

(if different from Mothers) Street    City    Postal Code

Phone: \_\_\_\_\_    **Email** \_\_\_\_\_

(use this email for communication)

I am the parent of, or have the legal custody of the child.

## Declaration:

I, the undersigned, declare that the information on this form is true and accurate

Name: (Please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_