

# Sacred Heart Parish

5508 48a Avenue, Red Deer, AB T4N 3V6  
Ph. 403 346-2618

Sacrament Preparation Coordinator - [eucharist-rec.shrd@caedm.ca](mailto:eucharist-rec.shrd@caedm.ca)

## FIRST RECONCILIATION and FIRST EUCHARIST REGISTRATION Candidate Information

Last Name:		First Name:		Middle Name:
Address:				
City:		Province:		Postal Code:
Main Contact Number:		E-mail Address: <i>(for information updates)</i>		
Date of Birth:		Male: <input type="radio"/>	Female: <input type="radio"/>	
Age at Registration:		Grade:	Teacher:	
School attending:				
Father's Last Name:		First Name:		Middle Name:
Father's Religion:		Father's Cel Phone #:		
Mother's <u>Maiden</u> Name:		First Name:		Middle Name:
Mother's Religion:		Mother's Cel Phone #:		

## Candidate Baptism Information

Name of Church of Baptism:		City:
Date of Baptism:	Province:	Country:
<i>Profession of Faith: (if Baptism took place in another faith)</i>		Date:
Parish:	City / Province:	

*A copy of the child's **Baptismal Certificate** is requested at registration.*

*If the candidate's name is different from that listed on the Baptismal Certificate – a copy of the legal name change must be submitted with the Baptismal Certificate.*

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Signature of Parent or Guardian

### FOR OFFICE USE ONLY

Copy of Baptismal Certificate: <input type="radio"/>	Registration Fee \$30: <input type="radio"/> Paid
Workbooks Received: <input type="radio"/> 1 <sup>st</sup> Reconciliation Book	<input type="radio"/> 1 <sup>st</sup> Eucharist Book
PIPA Participation Form Complete: <input type="radio"/>	Photo Received: <input type="radio"/>
Reconciliation Received on:	at
Eucharist Received on:	at
	Entered into PF: <input type="radio"/>